

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$47,854,470	\$22,406,000	(\$25,448,470)	-53%
2	Short Term Investments	\$10,160,000	\$30,358,000	\$20,198,000	199%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$42,766,700	\$40,685,950	(\$2,080,750)	-5%
4	Current Assets Whose Use is Limited for Current Liabilities	\$2,773,844	\$1,896,000	(\$877,844)	-32%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$129,301	\$129,301	0%
7	Inventories of Supplies	\$1,190,149	\$1,091,607	(\$98,542)	-8%
8	Prepaid Expenses	\$2,799,860	\$3,228,454	\$428,594	15%
9	Other Current Assets	\$2,948,541	\$3,200,000	\$251,459	9%
	Total Current Assets	\$110,493,564	\$102,995,312	(\$7,498,252)	-7%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$10,936,569	\$10,752,462	(\$184,107)	-2%
2	Board Designated for Capital Acquisition	\$118,316,405	\$102,946,004	(\$15,370,401)	-13%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$19,086,251	\$17,670,207	(\$1,416,044)	-7%
	Total Noncurrent Assets Whose Use is Limited:	\$148,339,225	\$131,368,673	(\$16,970,552)	-11%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$11,001,880	\$15,289,000	\$4,287,120	39%
7	Other Noncurrent Assets	\$11,981,815	\$12,905,000	\$923,185	8%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$453,616,450	\$482,602,053	\$28,985,603	6%
2	Less: Accumulated Depreciation	\$275,553,635	\$299,995,075	\$24,441,440	9%
	Property, Plant and Equipment, Net	\$178,062,815	\$182,606,978	\$4,544,163	3%
3	Construction in Progress	\$10,138,450	\$12,763,404	\$2,624,954	26%
	Total Net Fixed Assets	\$188,201,265	\$195,370,382	\$7,169,117	4%
	Total Assets	\$470,017,749	\$457,928,367	(\$12,089,382)	-3%
II.	LIABILITIES AND NET ASSETS				
A.	Current Liabilities:				

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LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	Accounts Payable and Accrued Expenses	\$18,972,638	\$18,656,957	(\$315,681)	-2%
2	Salaries, Wages and Payroll Taxes	\$28,400,357	\$29,448,800	\$1,048,443	4%
3	Due To Third Party Payers	\$965,643	\$13,580	(\$952,063)	-99%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$3,410,000	\$3,689,000	\$279,000	8%
6	Current Portion of Notes Payable	\$5,244	\$0	(\$5,244)	-100%
7	Other Current Liabilities	\$4,833,162	\$4,521,663	(\$311,499)	-6%
	Total Current Liabilities	\$56,587,044	\$56,330,000	(\$257,044)	0%
B.	<u>Long Term Debt:</u>				
1	Bonds Payable (Net of Current Portion)	\$52,587,952	\$48,150,307	(\$4,437,645)	-8%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$52,587,952	\$48,150,307	(\$4,437,645)	-8%
3	Accrued Pension Liability	\$64,263,947	\$48,654,915	(\$15,609,032)	-24%
4	Other Long Term Liabilities	\$34,622,749	\$35,902,006	\$1,279,257	4%
	Total Long Term Liabilities	\$151,474,648	\$132,707,228	(\$18,767,420)	-12%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C.	<u>Net Assets:</u>				
1	Unrestricted Net Assets or Equity	\$245,189,354	\$251,796,435	\$6,607,081	3%
2	Temporarily Restricted Net Assets	\$9,788,808	\$10,115,458	\$326,650	3%
3	Permanently Restricted Net Assets	\$6,977,895	\$6,979,246	\$1,351	0%
	Total Net Assets	\$261,956,057	\$268,891,139	\$6,935,082	3%
	Total Liabilities and Net Assets	\$470,017,749	\$457,928,367	(\$12,089,382)	-3%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2015 ACTUAL</u>	<u>FY 2016 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,264,918,959	\$1,287,540,436	\$22,621,477	2%
2	Less: Allowances	\$890,315,301	\$890,713,749	\$398,448	0%
3	Less: Charity Care	\$6,695,669	\$5,726,046	(\$969,623)	-14%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$367,907,989	\$391,100,641	\$23,192,652	6%
5	Provision for Bad Debts	\$10,271,353	\$10,993,577	\$722,224	7%
	Net Patient Service Revenue less provision for bad debts	\$357,636,636	\$380,107,064	\$22,470,428	6%
6	Other Operating Revenue	\$13,366,834	\$11,182,242	(\$2,184,592)	-16%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$371,003,470	\$391,289,306	\$20,285,836	5%
B. Operating Expenses:					
1	Salaries and Wages	\$168,078,237	\$174,263,192	\$6,184,955	4%
2	Fringe Benefits	\$42,556,795	\$35,656,146	(\$6,900,649)	-16%
3	Physicians Fees	\$4,053,027	\$3,942,380	(\$110,647)	-3%
4	Supplies and Drugs	\$41,070,578	\$44,774,551	\$3,703,973	9%
5	Depreciation and Amortization	\$23,551,155	\$24,047,595	\$496,440	2%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$2,603,790	\$2,323,206	(\$280,584)	-11%
8	Malpractice Insurance Cost	\$5,883,856	\$2,599,573	(\$3,284,283)	-56%
9	Other Operating Expenses	\$77,953,883	\$79,098,757	\$1,144,874	1%
	Total Operating Expenses	\$365,751,321	\$366,705,400	\$954,079	0%
	Income/(Loss) From Operations	\$5,252,149	\$24,583,906	\$19,331,757	368%
C. Non-Operating Revenue:					
1	Income from Investments	\$7,305,000	\$13,985,717	\$6,680,717	91%
2	Gifts, Contributions and Donations	\$2,027,000	\$393,718	(\$1,633,282)	-81%
3	Other Non-Operating Gains/(Losses)	(\$2,120,000)	(\$1,996,350)	\$123,650	-6%
	Total Non-Operating Revenue	\$7,212,000	\$12,383,085	\$5,171,085	72%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$12,464,149	\$36,966,991	\$24,502,842	197%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$12,464,149	\$36,966,991	\$24,502,842	197%
	Principal Payments	\$3,261,251	\$3,513,419	\$252,168	8%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$266,689,413	\$238,786,046	(\$27,903,367)	-10%
2	MEDICARE MANAGED CARE	\$66,537,673	\$73,197,147	\$6,659,474	10%
3	MEDICAID	\$76,836,069	\$72,029,066	(\$4,807,003)	-6%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$1,934,851	\$1,856,087	(\$78,764)	-4%
6	COMMERCIAL INSURANCE	\$9,895,485	\$10,574,558	\$679,073	7%
7	NON-GOVERNMENT MANAGED CARE	\$125,383,762	\$128,728,141	\$3,344,379	3%
8	WORKER'S COMPENSATION	\$6,691,001	\$5,513,548	(\$1,177,453)	-18%
9	SELF- PAY/UNINSURED	\$3,849,533	\$4,146,655	\$297,122	8%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$557,817,787	\$534,831,248	(\$22,986,539)	-4%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$205,249,189	\$217,871,600	\$12,622,411	6%
2	MEDICARE MANAGED CARE	\$62,218,116	\$80,083,574	\$17,865,458	29%
3	MEDICAID	\$127,898,287	\$130,532,218	\$2,633,931	2%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$3,663,118	\$3,518,578	(\$144,540)	-4%
6	COMMERCIAL INSURANCE	\$26,592,537	\$29,522,569	\$2,930,032	11%
7	NON-GOVERNMENT MANAGED CARE	\$260,276,128	\$271,226,885	\$10,950,757	4%
8	WORKER'S COMPENSATION	\$10,173,710	\$9,650,961	(\$522,749)	-5%
9	SELF- PAY/UNINSURED	\$11,030,087	\$10,302,803	(\$727,284)	-7%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$707,101,172	\$752,709,188	\$45,608,016	6%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$471,938,602	\$456,657,646	(\$15,280,956)	-3%
2	MEDICARE MANAGED CARE	\$128,755,789	\$153,280,721	\$24,524,932	19%
3	MEDICAID	\$204,734,356	\$202,561,284	(\$2,173,072)	-1%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$5,597,969	\$5,374,665	(\$223,304)	-4%
6	COMMERCIAL INSURANCE	\$36,488,022	\$40,097,127	\$3,609,105	10%
7	NON-GOVERNMENT MANAGED CARE	\$385,659,890	\$399,955,026	\$14,295,136	4%
8	WORKER'S COMPENSATION	\$16,864,711	\$15,164,509	(\$1,700,202)	-10%
9	SELF- PAY/UNINSURED	\$14,879,620	\$14,449,458	(\$430,162)	-3%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$1,264,918,959	\$1,287,540,436	\$22,621,477	2%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$61,364,040	\$58,426,279	(\$2,937,761)	-5%
2	MEDICARE MANAGED CARE	\$14,106,388	\$16,827,558	\$2,721,170	19%
3	MEDICAID	\$13,013,835	\$12,981,508	(\$32,327)	0%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$373,735	\$410,282	\$36,547	10%
6	COMMERCIAL INSURANCE	\$3,757,446	\$4,207,790	\$450,344	12%
7	NON-GOVERNMENT MANAGED CARE	\$59,073,969	\$68,440,272	\$9,366,303	16%
8	WORKER'S COMPENSATION	\$3,460,402	\$2,784,029	(\$676,373)	-20%
9	SELF- PAY/UNINSURED	\$1,360,408	\$1,130,602	(\$229,806)	-17%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT NET REVENUE	\$156,510,223	\$165,208,320	\$8,698,097	6%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$46,744,465	\$49,365,434	\$2,620,969	6%
2	MEDICARE MANAGED CARE	\$10,712,124	\$13,307,204	\$2,595,080	24%
3	MEDICAID	\$20,645,716	\$21,148,262	\$502,546	2%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$599,314	\$586,459	(\$12,855)	-2%
6	COMMERCIAL INSURANCE	\$10,504,830	\$11,296,021	\$791,191	8%
7	NON-GOVERNMENT MANAGED CARE	\$108,336,430	\$116,060,168	\$7,723,738	7%
8	WORKER'S COMPENSATION	\$4,993,897	\$3,518,675	(\$1,475,222)	-30%
9	SELF- PAY/UNINSURED	\$2,492,116	\$1,943,917	(\$548,199)	-22%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$205,028,892	\$217,226,140	\$12,197,248	6%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$108,108,505	\$107,791,713	(\$316,792)	0%
2	MEDICARE MANAGED CARE	\$24,818,512	\$30,134,762	\$5,316,250	21%
3	MEDICAID	\$33,659,551	\$34,129,770	\$470,219	1%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$973,049	\$996,741	\$23,692	2%
6	COMMERCIAL INSURANCE	\$14,262,276	\$15,503,811	\$1,241,535	9%
7	NON-GOVERNMENT MANAGED CARE	\$167,410,399	\$184,500,440	\$17,090,041	10%
8	WORKER'S COMPENSATION	\$8,454,299	\$6,302,704	(\$2,151,595)	-25%
9	SELF- PAY/UNINSURED	\$3,852,524	\$3,074,519	(\$778,005)	-20%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$361,539,115	\$382,434,460	\$20,895,345	6%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	6,102	5,605	(497)	-8%
2	MEDICARE MANAGED CARE	1,402	1,532	130	9%
3	MEDICAID	2,251	2,228	(23)	-1%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	62	65	3	5%
6	COMMERCIAL INSURANCE	264	279	15	6%
7	NON-GOVERNMENT MANAGED CARE	3,384	3,458	74	2%
8	WORKER'S COMPENSATION	60	48	(12)	-20%
9	SELF- PAY/UNINSURED	92	123	31	34%
10	SAGA	0	0	0	0%

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FISCAL YEAR 2016
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	13,617	13,338	(279)	-2%
B.	<u>PATIENT DAYS</u>				
1	MEDICARE TRADITIONAL	28,224	25,284	(2,940)	-10%
2	MEDICARE MANAGED CARE	6,607	6,819	212	3%
3	MEDICAID	10,039	9,360	(679)	-7%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	180	222	42	23%
6	COMMERCIAL INSURANCE	966	943	(23)	-2%
7	NON-GOVERNMENT MANAGED CARE	11,616	11,599	(17)	0%
8	WORKER'S COMPENSATION	198	148	(50)	-25%
9	SELF- PAY/UNINSURED	394	485	91	23%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	58,224	54,860	(3,364)	-6%
C.	<u>OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	222,466	224,191	1,725	1%
2	MEDICARE MANAGED CARE	52,629	61,800	9,171	17%
3	MEDICAID	119,492	118,190	(1,302)	-1%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	2,975	2,863	(112)	-4%
6	COMMERCIAL INSURANCE	27,821	27,692	(129)	0%
7	NON-GOVERNMENT MANAGED CARE	214,702	213,774	(928)	0%
8	WORKER'S COMPENSATION	15,811	13,534	(2,277)	-14%
9	SELF- PAY/UNINSURED	7,116	7,406	290	4%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	663,012	669,450	6,438	1%
IV.	<u>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</u>				
A.	<u>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</u>				
1	MEDICARE TRADITIONAL	\$77,834,601	\$71,829,246	(\$6,005,355)	-8%
2	MEDICARE MANAGED CARE	\$20,564,756	\$26,591,310	\$6,026,554	29%
3	MEDICAID	\$65,510,836	\$65,929,094	\$418,258	1%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$1,741,044	\$1,681,394	(\$59,650)	-3%
6	COMMERCIAL INSURANCE	\$8,107,525	\$8,905,189	\$797,664	10%
7	NON-GOVERNMENT MANAGED CARE	\$92,604,897	\$98,411,889	\$5,806,992	6%
8	WORKER'S COMPENSATION	\$3,755,044	\$3,405,698	(\$349,346)	-9%
9	SELF- PAY/UNINSURED	\$7,679,262	\$7,547,217	(\$132,045)	-2%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$277,797,965	\$284,301,037	\$6,503,072	2%
B.	<u>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</u>				
1	MEDICARE TRADITIONAL	\$9,869,607	\$9,940,542	\$70,935	1%
2	MEDICARE MANAGED CARE	\$2,858,725	\$3,564,790	\$706,065	25%

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(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
3	MEDICAID	\$8,281,194	\$8,031,580	(\$249,614)	-3%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$277,421	\$271,771	(\$5,650)	-2%
6	COMMERCIAL INSURANCE	\$1,770,968	\$1,939,519	\$168,551	10%
7	NON-GOVERNMENT MANAGED CARE	\$35,326,756	\$37,415,577	\$2,088,821	6%
8	WORKER'S COMPENSATION	\$1,897,872	\$1,121,360	(\$776,512)	-41%
9	SELF- PAY/UNINSURED	\$222,043	\$189,357	(\$32,686)	-15%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$60,504,586	\$62,474,496	\$1,969,910	3%
C.	<u>EMERGENCY DEPARTMENT OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	15,635	15,233	(402)	-3%
2	MEDICARE MANAGED CARE	4,346	5,030	684	16%
3	MEDICAID	23,044	21,656	(1,388)	-6%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	675	604	(71)	-11%
6	COMMERCIAL INSURANCE	2,439	2,358	(81)	-3%
7	NON-GOVERNMENT MANAGED CARE	28,630	27,945	(685)	-2%
8	WORKER'S COMPENSATION	1,897	1,634	(263)	-14%
9	SELF- PAY/UNINSURED	2,897	2,796	(101)	-3%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	79,563	77,256	(2,307)	-3%

MIDDLESEX HOSPITAL					
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REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. OPERATING EXPENSE BY CATEGORY					
A. Salaries & Wages:					
1	Nursing Salaries	\$48,109,273	\$47,399,411	(\$709,862)	-1%
2	Physician Salaries	\$29,654,826	\$30,400,071	\$745,245	3%
3	Non-Nursing, Non-Physician Salaries	\$90,314,138	\$96,463,710	\$6,149,572	7%
	Total Salaries & Wages	\$168,078,237	\$174,263,192	\$6,184,955	4%
B. Fringe Benefits:					
1	Nursing Fringe Benefits	\$12,181,092	\$9,690,325	(\$2,490,767)	-20%
2	Physician Fringe Benefits	\$7,508,493	\$6,214,984	(\$1,293,509)	-17%
3	Non-Nursing, Non-Physician Fringe Benefits	\$22,867,210	\$19,750,837	(\$3,116,373)	-14%
	Total Fringe Benefits	\$42,556,795	\$35,656,146	(\$6,900,649)	-16%
C. Contractual Labor Fees:					
1	Nursing Fees	\$532,781	\$266,261	(\$266,520)	-50%
2	Physician Fees	\$4,053,027	\$3,942,380	(\$110,647)	-3%
3	Non-Nursing, Non-Physician Fees	\$0	\$0	\$0	0%
	Total Contractual Labor Fees	\$4,585,808	\$4,208,641	(\$377,167)	-8%
D. Medical Supplies and Pharmaceutical Cost:					
1	Medical Supplies	\$30,045,580	\$32,827,872	\$2,782,292	9%
2	Pharmaceutical Costs	\$11,024,998	\$11,946,679	\$921,681	8%
	Total Medical Supplies and Pharmaceutical Cost	\$41,070,578	\$44,774,551	\$3,703,973	9%
E. Depreciation and Amortization:					
1	Depreciation-Building	\$10,729,732	\$10,880,670	\$150,938	1%
2	Depreciation-Equipment	\$12,583,510	\$13,161,197	\$577,687	5%
3	Amortization	\$237,913	\$5,728	(\$232,185)	-98%
	Total Depreciation and Amortization	\$23,551,155	\$24,047,595	\$496,440	2%
F. Bad Debts:					
1	Bad Debts	\$0	\$0	\$0	0%
G. Interest Expense:					
1	Interest Expense	\$2,603,790	\$2,323,206	(\$280,584)	-11%
H. Malpractice Insurance Cost:					
1	Malpractice Insurance Cost	\$5,883,856	\$2,599,573	(\$3,284,283)	-56%
I. Utilities:					
1	Water	\$370,385	\$275,277	(\$95,108)	-26%
2	Natural Gas	\$1,074,262	\$959,642	(\$114,620)	-11%
3	Oil	\$65,348	\$37,292	(\$28,056)	-43%
4	Electricity	\$2,925,231	\$3,045,325	\$120,094	4%
5	Telephone	\$1,637,498	\$1,574,544	(\$62,954)	-4%
6	Other Utilities	\$0	\$0	\$0	0%
	Total Utilities	\$6,072,724	\$5,892,080	(\$180,644)	-3%
J. Business Expenses:					

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	Accounting Fees	\$176,843	\$191,009	\$14,166	8%
2	Legal Fees	\$651,119	\$560,109	(\$91,010)	-14%
3	Consulting Fees	\$1,493,636	\$911,364	(\$582,272)	-39%
4	Dues and Membership	\$868,780	\$986,263	\$117,483	14%
5	Equipment Leases	\$1,968,551	\$1,755,557	(\$212,994)	-11%
6	Building Leases	\$4,321,619	\$4,304,908	(\$16,711)	0%
7	Repairs and Maintenance	\$1,940,494	\$1,720,643	(\$219,851)	-11%
8	Insurance	\$583,596	\$713,190	\$129,594	22%
9	Travel	\$1,277,886	\$1,032,291	(\$245,595)	-19%
10	Conferences	\$159,203	\$28,565	(\$130,638)	-82%
11	Property Tax	\$114,321	\$170,119	\$55,798	49%
12	General Supplies	\$1,942,979	\$1,523,269	(\$419,710)	-22%
13	Licenses and Subscriptions	\$543,369	\$484,893	(\$58,476)	-11%
14	Postage and Shipping	\$290,897	\$245,959	(\$44,938)	-15%
15	Advertising	\$355,568	\$195,907	(\$159,661)	-45%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$4,131,826	\$4,165,922	\$34,096	1%
18	Computer hardware & small equipment	\$313,698	\$192,585	(\$121,113)	-39%
19	Dietary / Food Services	\$1,636,801	\$1,640,938	\$4,137	0%
20	Lab Fees / Red Cross charges	\$1,953,250	\$1,569,601	(\$383,649)	-20%
21	Billing & Collection / Bank Fees	\$687,308	\$743,942	\$56,634	8%
22	Recruiting / Employee Education & Recognition	\$1,179,513	\$921,141	(\$258,372)	-22%
23	Laundry / Linen	\$477,415	\$452,419	(\$24,996)	-5%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$407,137	\$273,738	(\$133,399)	-33%
26	Purchased Services - Medical	\$4,021,073	\$4,506,416	\$485,343	12%
27	Purchased Services - Non Medical	\$22,153,076	\$20,735,915	(\$1,417,161)	-6%
28	Other Business Expenses	\$17,698,420	\$22,913,753	\$5,215,333	29%
	Total Business Expenses	\$71,348,378	\$72,940,416	\$1,592,038	2%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses - All Expense Categories*	\$365,751,321	\$366,705,400	\$954,079	0%
*A.-K.The total operating expenses amount above must agree with the total operating expenses amount on Report 150					
II. OPERATING EXPENSE BY DEPARTMENT					
A.	General Services:				
1	General Administration	\$44,491,015	\$51,148,602	\$6,657,587	15%
2	General Accounting	\$1,658,594	\$1,620,151	(\$38,443)	-2%
3	Patient Billing & Collection	\$4,007,909	\$3,834,552	(\$173,357)	-4%
4	Admitting / Registration Office	\$3,754,775	\$3,717,951	(\$36,824)	-1%
5	Data Processing	\$16,607,446	\$17,352,144	\$744,698	4%
6	Communications	\$2,097,934	\$2,066,459	(\$31,475)	-2%
7	Personnel	\$44,976,703	\$38,096,898	(\$6,879,805)	-15%
8	Public Relations	\$4,332,294	\$2,963,044	(\$1,369,250)	-32%
9	Purchasing	\$1,578,138	\$1,639,301	\$61,163	4%
10	Dietary and Cafeteria	\$4,021,334	\$3,975,432	(\$45,902)	-1%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
11	Housekeeping	\$2,968,297	\$3,025,218	\$56,921	2%
12	Laundry & Linen	\$829,408	\$828,665	(\$743)	0%
13	Operation of Plant	\$15,927,229	\$16,199,182	\$271,953	2%
14	Security	\$2,308,772	\$2,186,465	(\$122,307)	-5%
15	Repairs and Maintenance	\$0	\$0	\$0	0%
16	Central Sterile Supply	\$3,425,925	\$3,367,225	(\$58,700)	-2%
17	Pharmacy Department	\$13,567,708	\$13,974,756	\$407,048	3%
18	Other General Services	\$863,056	\$741,586	(\$121,470)	-14%
	Total General Services	\$167,416,537	\$166,737,631	(\$678,906)	0%
B.	Professional Services:				
1	Medical Care Administration	\$5,096,725	\$5,064,843	(\$31,882)	-1%
2	Residency Program	\$5,392,398	\$5,384,317	(\$8,081)	0%
3	Nursing Services Administration	\$3,203,153	\$2,947,192	(\$255,961)	-8%
4	Medical Records	\$4,270,482	\$4,256,976	(\$13,506)	0%
5	Social Service	\$435,824	\$445,596	\$9,772	2%
6	Other Professional Services	\$491,456	\$459,113	(\$32,343)	-7%
	Total Professional Services	\$18,890,038	\$18,558,037	(\$332,001)	-2%
C.	Special Services:				
1	Operating Room	\$23,720,282	\$26,515,404	\$2,795,122	12%
2	Recovery Room	\$2,005,280	\$1,971,868	(\$33,412)	-2%
3	Anesthesiology	\$1,138,391	\$1,148,417	\$10,026	1%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$9,646,791	\$9,784,057	\$137,266	1%
6	Diagnostic Ultrasound	\$1,996,303	\$2,091,366	\$95,063	5%
7	Radiation Therapy	\$3,514,904	\$3,380,994	(\$133,910)	-4%
8	Radioisotopes	\$804,062	\$948,796	\$144,734	18%
9	CT Scan	\$2,643,993	\$2,540,552	(\$103,441)	-4%
10	Laboratory	\$14,079,103	\$13,783,383	(\$295,720)	-2%
11	Blood Storing/Processing	\$1,474,396	\$1,393,675	(\$80,721)	-5%
12	Cardiology	\$745,724	\$798,292	\$52,568	7%
13	Electrocardiology	\$0	\$0	\$0	0%
14	Electroencephalography	\$506,896	\$324,864	(\$182,032)	-36%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$203,424	\$210,886	\$7,462	4%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$1,265,919	\$1,258,468	(\$7,451)	-1%
19	Pulmonary Function	\$51,183	\$32,931	(\$18,252)	-36%
20	Intravenous Therapy	\$900,803	\$936,421	\$35,618	4%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$9,242,527	\$9,617,750	\$375,223	4%
23	Renal Dialysis	\$167,786	\$174,113	\$6,327	4%
24	Emergency Room	\$23,533,864	\$23,988,821	\$454,957	2%
25	MRI	\$2,855,733	\$3,315,108	\$459,375	16%
26	PET Scan	\$349,490	\$307,087	(\$42,403)	-12%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$1,373,696	\$1,502,574	\$128,878	9%
29	Sleep Center	\$888,558	\$983,078	\$94,520	11%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$977,291	\$880,976	(\$96,315)	-10%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
32	Occupational Therapy / Physical Therapy	\$4,451,750	\$4,808,537	\$356,787	8%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$5,879,620	\$4,839,350	(\$1,040,270)	-18%
	Total Special Services	\$114,417,769	\$117,537,768	\$3,119,999	3%
D.	<u>Routine Services:</u>				
1	Medical & Surgical Units	\$26,892,178	\$26,248,393	(\$643,785)	-2%
2	Intensive Care Unit	\$6,378,398	\$6,056,896	(\$321,502)	-5%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,547,881	\$2,605,737	\$57,856	2%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$4,482,752	\$4,315,540	(\$167,212)	-4%
7	Newborn Nursery Unit	\$1,219,803	\$1,251,127	\$31,324	3%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$1,959,999	\$1,910,837	(\$49,162)	-3%
11	Home Care	\$11,811,024	\$11,685,128	(\$125,896)	-1%
12	Outpatient Clinics	\$9,550,498	\$9,617,747	\$67,249	1%
13	Other Routine Services	\$184,444	\$180,559	(\$3,885)	-2%
	Total Routine Services	\$65,026,977	\$63,871,964	(\$1,155,013)	-2%
E.	<u>Other Departments:</u>				
1	Miscellaneous Other Departments	\$0	\$0	\$0	0%
	Total Operating Expenses - All Departments*	\$365,751,321	\$366,705,400	\$954,079	0%
*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.					

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL	ACTUAL	ACTUAL
		FY 2014	FY 2015	FY 2016
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$354,010,685	\$357,636,636	\$380,107,064
2	Other Operating Revenue	12,557,059	13,366,834	11,182,242
3	Total Operating Revenue	\$366,567,744	\$371,003,470	\$391,289,306
4	Total Operating Expenses	345,860,614	365,751,321	366,705,400
5	Income/(Loss) From Operations	\$20,707,130	\$5,252,149	\$24,583,906
6	Total Non-Operating Revenue	14,976,476	7,212,000	12,383,085
7	Excess/(Deficiency) of Revenue Over Expenses	\$35,683,606	\$12,464,149	\$36,966,991
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	5.43%	1.39%	6.09%
2	Hospital Non Operating Margin	3.93%	1.91%	3.07%
3	Hospital Total Margin	9.35%	3.30%	9.16%
4	Income/(Loss) From Operations	\$20,707,130	\$5,252,149	\$24,583,906
5	Total Operating Revenue	\$366,567,744	\$371,003,470	\$391,289,306
6	Total Non-Operating Revenue	\$14,976,476	\$7,212,000	\$12,383,085
7	Total Revenue	\$381,544,220	\$378,215,470	\$403,672,391
8	Excess/(Deficiency) of Revenue Over Expenses	\$35,683,606	\$12,464,149	\$36,966,991
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$270,689,000	\$245,189,354	\$251,796,435
2	Hospital Total Net Assets	\$287,700,000	\$261,956,057	\$268,891,139
3	Hospital Change in Total Net Assets	\$23,534,000	(\$25,743,943)	\$6,935,082
4	Hospital Change in Total Net Assets %	108.9%	-8.9%	2.6%
D. <u>Cost Data Summary</u>				
1	<u>Ratio of Cost to Charges</u>	0.27	0.29	0.28
2	Total Operating Expenses	\$345,860,614	\$365,751,321	\$366,705,400
3	Total Gross Revenue	\$1,272,225,607	\$1,264,918,959	\$1,287,540,436
4	Total Other Operating Revenue	\$12,557,059	\$13,366,834	\$11,182,242

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	ACTUAL FY 2016
5	<u>Private Payment to Cost Ratio</u>	1.57	1.51	1.61
6	Total Non-Government Payments	\$194,452,401	\$193,979,498	\$209,381,474
7	Total Uninsured Payments	\$3,834,318	\$3,852,524	\$3,074,519
8	Total Non-Government Charges	\$470,219,797	\$453,892,243	\$469,666,120
9	Total Uninsured Charges	\$19,555,143	\$14,879,620	\$14,449,458
10	<u>Medicare Payment to Cost Ratio</u>	0.81	0.77	0.80
11	Total Medicare Payments	\$131,356,288	\$132,927,017	\$137,926,475
12	Total Medicare Charges	\$600,632,232	\$600,694,391	\$609,938,367
13	<u>Medicaid Payment to Cost Ratio</u>	0.60	0.57	0.60
14	Total Medicaid Payments	\$31,692,766	\$33,659,551	\$34,129,770
15	Total Medicaid Charges	\$196,428,837	\$204,734,356	\$202,561,284
16	<u>Uncompensated Care Cost</u>	\$6,048,582	\$4,854,713	\$4,720,928
17	Charity Care	\$8,559,951	\$6,695,669	\$5,726,046
18	Bad Debts	\$13,908,964	\$10,271,353	\$10,993,577
19	Total Uncompensated Care	\$22,468,915	\$16,967,022	\$16,719,623
20	<u>Uncompensated Care % of Total Expenses</u>	1.7%	1.3%	1.3%
21	Total Operating Expenses	\$345,860,614	\$365,751,321	\$366,705,400
E.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	2	2	2
2	Total Current Assets	\$113,367,000	\$110,493,564	\$102,995,312
3	Total Current Liabilities	\$64,104,000	\$56,587,044	\$56,330,000
4	<u>Days Cash on Hand</u>	66	62	56
5	Cash and Cash Equivalents	\$36,581,000	\$47,854,470	\$22,406,000
6	Short Term Investments	21,491,000	10,160,000	30,358,000
7	Total Cash and Short Term Investments	\$58,072,000	\$58,014,470	\$52,764,000
8	Total Operating Expenses	\$345,860,614	\$365,751,321	\$366,705,400

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	ACTUAL FY 2016
9	Depreciation Expense	\$22,309,482	\$23,551,155	\$24,047,595
10	Operating Expenses less Depreciation Expense	\$323,551,132	\$342,200,166	\$342,657,805
11	<u>Days Revenue in Patient Accounts Receivable</u>	46	43	39
12	Net Patient Accounts Receivable	\$43,502,000	\$42,766,700	\$40,685,950
13	Due From Third Party Payers	\$808,000	\$0	\$129,301
14	Due To Third Party Payers	\$0	\$965,643	\$13,580
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$44,310,000	\$41,801,057	\$40,801,671
16	Total Net Patient Revenue	\$354,010,685	\$357,636,636	\$380,107,064
17	<u>Average Payment Period</u>	72	60	60
18	Total Current Liabilities	\$64,104,000	\$56,587,044	\$56,330,000
19	Total Operating Expenses	\$345,860,614	\$365,751,321	\$366,705,400
20	Depreciation Expense	\$22,309,482	\$23,551,155	\$24,047,595
21	Total Operating Expenses less Depreciation Expense	\$323,551,132	\$342,200,166	\$342,657,805
F.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	59.5	55.7	58.7
2	Total Net Assets	\$287,700,000	\$261,956,057	\$268,891,139
3	Total Assets	\$483,811,000	\$470,017,749	\$457,928,367
4	<u>Cash Flow to Total Debt Ratio</u>	48.0	33.0	58.4
5	Excess/(Deficiency) of Revenues Over Expenses	\$35,683,606	\$12,464,149	\$36,966,991
6	Depreciation Expense	\$22,309,482	\$23,551,155	\$24,047,595
7	Excess of Revenues Over Expenses and Depreciation Expense	\$57,993,088	\$36,015,304	\$61,014,586
8	Total Current Liabilities	\$64,104,000	\$56,587,044	\$56,330,000
9	Total Long Term Debt	\$56,689,000	\$52,587,952	\$48,150,307
10	Total Current Liabilities and Total Long Term Debt	\$120,793,000	\$109,174,996	\$104,480,307
11	<u>Long Term Debt to Capitalization Ratio</u>	16.5	16.7	15.2
12	Total Long Term Debt	\$56,689,000	\$52,587,952	\$48,150,307
13	Total Net Assets	\$287,700,000	\$261,956,057	\$268,891,139

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	ACTUAL FY 2016
14	Total Long Term Debt and Total Net Assets	\$344,389,000	\$314,544,009	\$317,041,446
15	<u>Debt Service Coverage Ratio</u>	10.1	6.6	10.9
16	Excess Revenues over Expenses	35,683,606	\$12,464,149	\$36,966,991
17	Interest Expense	2,896,503	\$2,603,790	\$2,323,206
18	Depreciation and Amortization Expense	22,309,482	\$23,551,155	\$24,047,595
19	Principal Payments	3,156,000	\$3,261,251	\$3,513,419
G.	<u>Other Financial Ratios</u>			
20	<u>Average Age of Plant</u>	11.3	11.7	12.5
21	Accumulated Depreciation	252,473,000	275,553,635	299,995,075
22	Depreciation and Amortization Expense	22,309,482	23,551,155	24,047,595
H.	<u>Utilization Measures Summary</u>			
1	Patient Days	59,299	58,224	54,860
2	Discharges	14,296	13,617	13,338
3	ALOS	4.1	4.3	4.1
4	Staffed Beds	183	192	183
5	Available Beds	-	245	245
6	Licensed Beds	237	297	297
7	Occupancy of Staffed Beds	88.8%	83.1%	82.1%
8	Occupancy of Available Beds	68.5%	65.1%	61.3%
9	Full Time Equivalent Employees	2,081.2	2,107.2	2,104.3
I.	<u>Hospital Gross Revenue Payer Mix Percentage</u>			
1	Non-Government Gross Revenue Payer Mix Percentage	35.4%	34.7%	35.4%
2	Medicare Gross Revenue Payer Mix Percentage	47.2%	47.5%	47.4%
3	Medicaid Gross Revenue Payer Mix Percentage	15.4%	16.2%	15.7%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Gross Revenue Payer Mix Percentage	1.5%	1.2%	1.1%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.4%	0.4%	0.4%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$450,664,654	\$439,012,623	\$455,216,662

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	ACTUAL FY 2016
9	Medicare Gross Revenue (Charges)	\$600,632,232	\$600,694,391	\$609,938,367
10	Medicaid Gross Revenue (Charges)	\$196,428,837	\$204,734,356	\$202,561,284
11	Other Medical Assistance Gross Revenue (Charges)	\$0	\$0	\$0
12	Uninsured Gross Revenue (Charges)	\$19,555,143	\$14,879,620	\$14,449,458
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$4,944,741	\$5,597,969	\$5,374,665
14	Total Gross Revenue (Charges)	\$1,272,225,607	\$1,264,918,959	\$1,287,540,436
J. Hospital Net Revenue Payer Mix Percentage				
1	Non-Government Net Revenue Payer Mix Percentage	53.2%	52.6%	53.9%
2	Medicare Net Revenue Payer Mix Percentage	36.7%	36.8%	36.1%
3	Medicaid Net Revenue Payer Mix Percentage	8.8%	9.3%	8.9%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	1.1%	1.1%	0.8%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.3%	0.3%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$190,618,083	\$190,126,974	\$206,306,955
9	Medicare Net Revenue (Payments)	\$131,356,288	\$132,927,017	\$137,926,475
10	Medicaid Net Revenue (Payments)	\$31,692,766	\$33,659,551	\$34,129,770
11	Other Medical Assistance Net Revenue (Payments)	\$0	\$0	\$0
12	Uninsured Net Revenue (Payments)	\$3,834,318	\$3,852,524	\$3,074,519
13	CHAMPUS / TRICARE Net Revenue Payments)	\$661,513	\$973,049	\$996,741
14	Total Net Revenue (Payments)	\$358,162,968	\$361,539,115	\$382,434,460
K. Discharges				
1	Non-Government (Including Self Pay / Uninsured)	4,216	3,800	3,908
2	Medicare	7,760	7,504	7,137
3	Medical Assistance	2,263	2,251	2,228
4	Medicaid	2,263	2,251	2,228
5	Other Medical Assistance	-	-	-
6	CHAMPUS / TRICARE	57	62	65
7	Uninsured (Included In Non-Government)	139	92	123
8	Total	14,296	13,617	13,338
L. Case Mix Index				
1	Non-Government (Including Self Pay / Uninsured)	1.18891	1.27619	1.35110
2	Medicare	1.37202	1.42635	1.49300
3	Medical Assistance	1.04375	1.07462	1.14010
4	Medicaid	1.04375	1.07462	1.14010
5	Other Medical Assistance	0.00000	0.00000	0.00000

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL	ACTUAL	ACTUAL
		<u>FY 2014</u>	<u>FY 2015</u>	<u>FY 2016</u>
6	CHAMPUS / TRICARE	1.05180	1.22936	1.02620
7	Uninsured (Included In Non-Government)	1.12178	1.33100	1.24710
8	Total Case Mix Index	1.26478	1.32541	1.39020
M. <u>Emergency Department Visits</u>				
1	Emergency Room - Treated and Admitted	9,060	8,263	7,940
2	Emergency Room - Treated and Discharged	80,555	79,563	77,256
3	Total Emergency Room Visits	89,615	87,826	85,196

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. MEDICARE MANAGED CARE					
A. ANTHEM - MEDICARE BLUE CONNECTICUT					
1	Inpatient Charges	\$1,890,185	\$5,124,552	\$3,234,367	171%
2	Inpatient Payments	\$400,731	\$1,178,102	\$777,371	194%
3	Outpatient Charges	\$2,335,958	\$6,359,040	\$4,023,082	172%
4	Outpatient Payments	\$402,183	\$1,056,659	\$654,476	163%
5	Discharges	45	108	63	140%
6	Patient Days	191	537	346	181%
7	Outpatient Visits (Excludes ED Visits)	1,813	4,508	2,695	149%
8	Emergency Department Outpatient Visits	222	508	286	129%
9	Emergency Department Inpatient Admissions	41	98	57	139%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,226,143	\$11,483,592	\$7,257,449	172%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$802,914	\$2,234,761	\$1,431,847	178%
B. CIGNA HEALTHCARE					
1	Inpatient Charges	\$61,673	\$0	(\$61,673)	-100%
2	Inpatient Payments	\$13,075	\$0	(\$13,075)	-100%
3	Outpatient Charges	\$14,812	\$1,180	(\$13,632)	-92%
4	Outpatient Payments	\$2,550	\$196	(\$2,354)	-92%
5	Discharges	1	0	(1)	-100%
6	Patient Days	8	0	(8)	-100%
7	Outpatient Visits (Excludes ED Visits)	11	1	(10)	-91%
8	Emergency Department Outpatient Visits	0	1	1	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$76,485	\$1,180	(\$75,305)	-98%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$15,625	\$196	(\$15,429)	-99%
C. CONNECTICARE, INC.					
1	Inpatient Charges	\$43,939,771	\$44,702,320	\$762,549	2%
2	Inpatient Payments	\$9,315,496	\$10,276,779	\$961,283	10%
3	Outpatient Charges	\$44,794,953	\$49,989,825	\$5,194,872	12%
4	Outpatient Payments	\$7,712,369	\$8,306,632	\$594,263	8%
5	Discharges	949	998	49	5%
6	Patient Days	4,370	4,226	(144)	-3%
7	Outpatient Visits (Excludes ED Visits)	34,762	35,437	675	2%
8	Emergency Department Outpatient Visits	2,735	2,816	81	3%
9	Emergency Department Inpatient Admissions	791	812	21	3%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$88,734,724	\$94,692,145	\$5,957,421	7%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$17,027,865	\$18,583,411	\$1,555,546	9%
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$790	\$0	(\$790)	-100%
4	Outpatient Payments	\$136	\$0	(\$136)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	1	0	(1)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$790	\$0	(\$790)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$136	\$0	(\$136)	-100%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$6,277,437	\$4,615,692	(\$1,661,745)	-26%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
2	Inpatient Payments	\$1,330,854	\$1,061,118	(\$269,736)	-20%
3	Outpatient Charges	\$4,820,817	\$5,436,812	\$615,995	13%
4	Outpatient Payments	\$830,003	\$903,416	\$73,413	9%
5	Discharges	113	58	(55)	-49%
6	Patient Days	512	279	(233)	-46%
7	Outpatient Visits (Excludes ED Visits)	3,742	3,854	112	3%
8	Emergency Department Outpatient Visits	1,035	510	(525)	-51%
9	Emergency Department Inpatient Admissions	340	47	(293)	-86%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$11,098,254	\$10,052,504	(\$1,045,750)	-9%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,160,857	\$1,964,534	(\$196,323)	-9%
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$8,760	\$23,259	\$14,499	166%
4	Outpatient Payments	\$1,508	\$3,865	\$2,357	156%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	7	16	9	129%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$8,760	\$23,259	\$14,499	166%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,508	\$3,865	\$2,357	156%
G.	UNITED HEALTHCARE INSURANCE COMPANY				
1	Inpatient Charges	\$9,373,212	\$14,763,904	\$5,390,692	58%
2	Inpatient Payments	\$1,987,177	\$3,394,128	\$1,406,951	71%
3	Outpatient Charges	\$5,353,921	\$13,655,106	\$8,301,185	155%
4	Outpatient Payments	\$921,787	\$2,269,021	\$1,347,234	146%
5	Discharges	174	277	103	59%
6	Patient Days	1,019	1,358	339	33%
7	Outpatient Visits (Excludes ED Visits)	4,155	9,680	5,525	133%
8	Emergency Department Outpatient Visits	267	1,060	793	297%
9	Emergency Department Inpatient Admissions	20	247	227	1135%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$14,727,133	\$28,419,010	\$13,691,877	93%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,908,964	\$5,663,149	\$2,754,185	95%
H.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$372,761	\$479,091	\$106,330	29%
2	Inpatient Payments	\$79,028	\$110,140	\$31,112	39%
3	Outpatient Charges	\$264,795	\$255,688	(\$9,107)	-3%
4	Outpatient Payments	\$45,590	\$42,487	(\$3,103)	-7%
5	Discharges	8	9	1	13%
6	Patient Days	31	56	25	81%
7	Outpatient Visits (Excludes ED Visits)	205	181	(24)	-12%
8	Emergency Department Outpatient Visits	6	41	35	583%
9	Emergency Department Inpatient Admissions	0	8	8	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$637,556	\$734,779	\$97,223	15%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$124,618	\$152,627	\$28,009	22%
I.	AETNA				
1	Inpatient Charges	\$3,810,466	\$3,185,214	(\$625,252)	-16%
2	Inpatient Payments	\$807,842	\$732,260	(\$75,582)	-9%
3	Outpatient Charges	\$4,178,182	\$4,050,397	(\$127,785)	-3%
4	Outpatient Payments	\$719,360	\$673,040	(\$46,320)	-6%
5	Discharges	92	75	(17)	-18%
6	Patient Days	388	324	(64)	-16%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
7	Outpatient Visits (Excludes ED Visits)	3,242	2,871	(371)	-11%
8	Emergency Department Outpatient Visits	75	43	(32)	-43%
9	Emergency Department Inpatient Admissions	6	65	59	983%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$7,988,648	\$7,235,611	(\$753,037)	-9%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,527,202	\$1,405,300	(\$121,902)	-8%
J.	HUMANA				
1	Inpatient Charges	\$812,168	\$326,374	(\$485,794)	-60%
2	Inpatient Payments	\$172,185	\$75,031	(\$97,154)	-56%
3	Outpatient Charges	\$445,128	\$311,382	(\$133,746)	-30%
4	Outpatient Payments	\$76,638	\$51,741	(\$24,897)	-32%
5	Discharges	20	7	(13)	-65%
6	Patient Days	88	39	(49)	-56%
7	Outpatient Visits (Excludes ED Visits)	345	221	(124)	-36%
8	Emergency Department Outpatient Visits	6	51	45	750%
9	Emergency Department Inpatient Admissions	0	6	6	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,257,296	\$637,756	(\$619,540)	-49%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$248,823	\$126,772	(\$122,051)	-49%
K.	SECURE HORIZONS				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$885	\$885	0%
4	Outpatient Payments	\$0	\$147	\$147	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	1	1	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$885	\$885	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$147	\$147	0%
L.	UNICARE LIFE & HEALTH INSURANCE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
M.	UNIVERSAL AMERICAN				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
N.	EVERCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
II.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$66,537,673	\$73,197,147	\$6,659,474	10%
	TOTAL INPATIENT PAYMENTS	\$14,106,388	\$16,827,558	\$2,721,170	19%
	TOTAL OUTPATIENT CHARGES	\$62,218,116	\$80,083,574	\$17,865,458	29%
	TOTAL OUTPATIENT PAYMENTS	\$10,712,124	\$13,307,204	\$2,595,080	24%
	TOTAL DISCHARGES	1,402	1,532	130	9%
	TOTAL PATIENT DAYS	6,607	6,819	212	3%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	48,283	56,770	8,487	18%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	4,346	5,030	684	16%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	1,198	1,283	85	7%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$128,755,789	\$153,280,721	\$24,524,932	19%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$24,818,512	\$30,134,762	\$5,316,250	21%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2015 ACTUAL	(4) FY 2016 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2015 ACTUAL	(4) FY 2016 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
E.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F.	FIRST CHOICE OF CONNECTICUT, PREFERRED ONE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
H.	AETNA				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2015 ACTUAL	(4) FY 2016 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL DISCHARGES	0	0	0	0%
	TOTAL PATIENT DAYS	0	0	0	0%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

MIDDLESEX HEALTH SYSTEM, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$50,370,000	\$25,150,000	(\$25,220,000)	-50%
2	Short Term Investments	\$10,160,000	\$30,358,000	\$20,198,000	199%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$44,169,000	\$42,471,000	(\$1,698,000)	-4%
4	Current Assets Whose Use is Limited for Current Liabilities	\$2,858,000	\$1,980,000	(\$878,000)	-31%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$129,301	\$129,301	0%
7	Inventories of Supplies	\$1,190,149	\$1,091,607	(\$98,542)	-8%
8	Prepaid Expenses	\$3,106,851	\$3,680,393	\$573,542	18%
9	Other Current Assets	\$2,958,000	\$3,075,699	\$117,699	4%
	Total Current Assets	\$114,812,000	\$107,936,000	(\$6,876,000)	-6%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$10,937,000	\$10,752,000	(\$185,000)	-2%
2	Board Designated for Capital Acquisition	\$120,455,000	\$102,995,000	(\$17,460,000)	-14%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$15,948,000	\$15,936,000	(\$12,000)	0%
	Total Noncurrent Assets Whose Use is Limited:	\$147,340,000	\$129,683,000	(\$17,657,000)	-12%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$9,944,000	\$15,289,000	\$5,345,000	54%
7	Other Noncurrent Assets	\$13,281,000	\$13,703,000	\$422,000	3%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$475,594,000	\$504,271,000	\$28,677,000	6%
2	Less: Accumulated Depreciation	\$285,642,000	\$310,738,000	\$25,096,000	\$0
	Property, Plant and Equipment, Net	\$189,952,000	\$193,533,000	\$3,581,000	2%
3	Construction in Progress	\$10,205,000	\$13,482,000	\$3,277,000	32%
	Total Net Fixed Assets	\$200,157,000	\$207,015,000	\$6,858,000	3%
	Total Assets	\$485,534,000	\$473,626,000	(\$11,908,000)	-2%

MIDDLESEX HEALTH SYSTEM, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$19,782,000	\$19,247,000	(\$535,000)	-3%
2	Salaries, Wages and Payroll Taxes	\$31,202,000	\$29,839,000	(\$1,363,000)	-4%
3	Due To Third Party Payers	\$0	\$0	\$0	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$3,681,000	\$4,154,000	\$473,000	13%
6	Current Portion of Notes Payable	\$85,000	\$0	(\$85,000)	-100%
7	Other Current Liabilities	\$5,107,000	\$6,338,000	\$1,231,000	24%
	Total Current Liabilities	\$59,857,000	\$59,578,000	(\$279,000)	0%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$56,749,000	\$51,930,000	(\$4,819,000)	-8%
2	Notes Payable (Net of Current Portion)	\$805,000	\$814,000	\$9,000	1%
	Total Long Term Debt	\$57,554,000	\$52,744,000	(\$4,810,000)	-8%
3	Accrued Pension Liability	\$64,264,000	\$48,655,000	(\$15,609,000)	-24%
4	Other Long Term Liabilities	\$34,840,000	\$36,140,000	\$1,300,000	4%
	Total Long Term Liabilities	\$156,658,000	\$137,539,000	(\$19,119,000)	-12%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$252,186,000	\$259,367,000	\$7,181,000	3%
2	Temporarily Restricted Net Assets	\$9,855,000	\$10,163,000	\$308,000	3%
3	Permanently Restricted Net Assets	\$6,978,000	\$6,979,000	\$1,000	0%
	Total Net Assets	\$269,019,000	\$276,509,000	\$7,490,000	3%
	Total Liabilities and Net Assets	\$485,534,000	\$473,626,000	(\$11,908,000)	-2%

MIDDLESEX HEALTH SYSTEM, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,295,537,000	\$1,327,597,000	\$32,060,000	2%
2	Less: Allowances	\$901,336,000	\$907,119,000	\$5,783,000	1%
3	Less: Charity Care	\$6,696,000	\$5,726,000	(\$970,000)	-14%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$387,505,000	\$414,752,000	\$27,247,000	7%
5	Provision for Bad Debts	\$10,499,000	\$11,388,000	\$889,000	8%
	Net Patient Service Revenue less provision for bad debts	\$377,006,000	\$403,364,000	\$26,358,000	7%
6	Other Operating Revenue	\$14,648,000	\$12,659,000	(\$1,989,000)	-14%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$391,654,000	\$416,023,000	\$24,369,000	6%
B. Operating Expenses:					
1	Salaries and Wages	\$183,156,000	\$192,924,000	\$9,768,000	5%
2	Fringe Benefits	\$45,284,000	\$39,012,000	(\$6,272,000)	-14%
3	Physicians Fees	\$4,053,027	\$3,942,380	(\$110,647)	-3%
4	Supplies and Drugs	\$42,409,000	\$46,280,000	\$3,871,000	9%
5	Depreciation and Amortization	\$24,444,000	\$25,127,000	\$683,000	3%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$2,862,000	\$2,568,000	(\$294,000)	-10%
8	Malpractice Insurance Cost	\$6,082,265	\$3,007,878	(\$3,074,387)	-51%
9	Other Operating Expenses	\$82,309,708	\$84,931,742	\$2,622,034	3%
	Total Operating Expenses	\$390,600,000	\$397,793,000	\$7,193,000	2%
	Income/(Loss) From Operations	\$1,054,000	\$18,230,000	\$17,176,000	1630%
C. Non-Operating Revenue:					
1	Income from Investments	\$5,651,000	\$12,211,520	\$6,560,520	116%
2	Gifts, Contributions and Donations	\$2,027,000	\$393,719	(\$1,633,281)	-81%
3	Other Non-Operating Gains/(Losses)	(\$483,000)	(\$222,154)	\$260,846	-54%
	Total Non-Operating Revenue	\$7,195,000	\$12,383,085	\$5,188,085	72%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$8,249,000	\$30,613,085	\$22,364,085	271%

MIDDLESEX HEALTH SYSTEM, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2015</u> <u>ACTUAL</u>	<u>FY 2016</u> <u>ACTUAL</u>	<u>AMOUNT</u> <u>DIFFERENCE</u>	<u>%</u> <u>DIFFERENCE</u>
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$8,249,000	\$30,613,085	\$22,364,085	271%

MIDDLESEX HEALTH SYSTEM, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>ACTUAL</u>
		<u>FY 2014</u>	<u>FY 2015</u>	<u>FY 2016</u>
A. <u>Parent Corporation Statement of Operations Summary</u>				
1	Net Patient Revenue	\$370,244,000	\$377,006,000	\$403,364,000
2	Other Operating Revenue	13,560,000	14,648,000	12,659,000
3	Total Operating Revenue	\$383,804,000	\$391,654,000	\$416,023,000
4	Total Operating Expenses	366,898,000	390,600,000	397,793,000
5	Income/(Loss) From Operations	\$16,906,000	\$1,054,000	\$18,230,000
6	Total Non-Operating Revenue	14,998,000	7,195,000	12,383,085
7	Excess/(Deficiency) of Revenue Over Expenses	\$31,904,000	\$8,249,000	\$30,613,085
B. <u>Parent Corporation Profitability Summary</u>				
1	Parent Corporation Operating Margin	4.24%	0.26%	4.26%
2	Parent Corporation Non-Operating Margin	3.76%	1.80%	2.89%
3	Parent Corporation Total Margin	8.00%	2.07%	7.15%
4	Income/(Loss) From Operations	\$16,906,000	\$1,054,000	\$18,230,000
5	Total Operating Revenue	\$383,804,000	\$391,654,000	\$416,023,000
6	Total Non-Operating Revenue	\$14,998,000	\$7,195,000	\$12,383,085
7	Total Revenue	\$398,802,000	\$398,849,000	\$428,406,085
8	Excess/(Deficiency) of Revenue Over Expenses	\$31,904,000	\$8,249,000	\$30,613,085
C. <u>Parent Corporation Net Assets Summary</u>				
1	Parent Corporation Unrestricted Net Assets	\$276,492,000	\$252,186,000	\$259,367,000
2	Parent Corporation Total Net Assets	\$293,600,000	\$269,019,000	\$276,509,000
3	Parent Corporation Change in Total Net Assets	\$23,281,000	(\$24,581,000)	\$7,490,000
4	Parent Corporation Change in Total Net Assets %	108.6%	-8.4%	2.8%
D. <u>Liquidity Measures Summary</u>				
1	Current Ratio	1.77	1.92	1.81

MIDDLESEX HEALTH SYSTEM, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2014	FY 2015	FY 2016
2	Total Current Assets	\$118,001,000	\$114,812,000	\$107,936,000
3	Total Current Liabilities	\$66,535,000	\$59,857,000	\$59,578,000
4	<u>Days Cash on Hand</u>	65	60	54
5	Cash and Cash Equivalents	\$39,755,000	\$50,370,000	\$25,150,000
6	Short Term Investments	\$21,491,000	\$10,160,000	\$30,358,000
7	Total Cash and Short Term Investments	\$61,246,000	\$60,530,000	\$55,508,000
8	Total Operating Expenses	\$366,898,000	\$390,600,000	\$397,793,000
9	Depreciation Expense	\$23,047,000	\$24,444,000	\$25,127,000
10	Operating Expenses less Depreciation Expense	\$343,851,000	\$366,156,000	\$372,666,000
11	<u>Days Revenue in Patient Accounts Receivable</u>	45	43	39
12	Net Patient Accounts Receivable	\$ 44,515,000	\$ 44,169,000	\$ 42,471,000
13	Due From Third Party Payers	\$808,000	\$0	\$129,301
14	Due To Third Party Payers	\$0	\$0	\$0
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 45,323,000	\$ 44,169,000	\$ 42,600,301
16	Total Net Patient Revenue	\$370,244,000	\$377,006,000	\$403,364,000
17	<u>Average Payment Period</u>	71	60	58
18	Total Current Liabilities	\$66,535,000	\$59,857,000	\$59,578,000
19	Total Operating Expenses	\$366,898,000	\$390,600,000	\$397,793,000
20	Depreciation Expense	\$23,047,000	\$24,444,000	\$25,127,000
20	Total Operating Expenses less Depreciation Expense	\$343,851,000	\$366,156,000	\$372,666,000
E.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	59.0	55.4	58.4
2	Total Net Assets	\$293,600,000	\$269,019,000	\$276,509,000

MIDDLESEX HEALTH SYSTEM, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2014	FY 2015	FY 2016
3	Total Assets	\$497,665,000	\$485,534,000	\$473,626,000
4	<u>Cash Flow to Total Debt Ratio</u>	42.7	27.8	49.6
5	Excess/(Deficiency) of Revenues Over Expenses	\$31,904,000	\$8,249,000	\$30,613,085
6	Depreciation Expense	\$23,047,000	\$24,444,000	\$25,127,000
7	Excess of Revenues Over Expenses and Depreciation Expense	\$54,951,000	\$32,693,000	\$55,740,085
8	Total Current Liabilities	\$66,535,000	\$59,857,000	\$59,578,000
9	Total Long Term Debt	\$62,014,000	\$57,554,000	\$52,744,000
10	Total Current Liabilities and Total Long Term Debt	\$128,549,000	\$117,411,000	\$112,322,000
11	<u>Long Term Debt to Capitalization Ratio</u>	17.4	17.6	16.0
12	Total Long Term Debt	\$62,014,000	\$57,554,000	\$52,744,000
13	Total Net Assets	\$293,600,000	\$269,019,000	\$276,509,000
14	Total Long Term Debt and Total Net Assets	\$355,614,000	\$326,573,000	\$329,253,000

MIDDLESEX HOSPITAL								
TWELVE MONTHS ACTUAL FILING								
FISCAL YEAR 2016								
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT								
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
		PATIENT	DISCHARGES OR	ADMISSIONS	STAFFED	AVAILABLE	OCCUPANCY	OCCUPANCY
LINE	DESCRIPTION	DAYS	CU/CCU # PATIENT		BEDS (A)	BEDS	OF STAFFED	OF AVAILABLE
							BEDS (A)	BEDS
1	Adult Medical/Surgical	35,793	10,253	10,218	126	155	77.8%	63.3%
2	ICU/CCU (Excludes Neonatal ICU)	6,828	666	0	20	24	93.5%	77.9%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	6,564	895	888	18	20	99.9%	89.9%
	TOTAL PSYCHIATRIC	6,564	895	888	18	20	99.9%	89.9%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	2,844	1,112	1,112	9	23	86.6%	33.9%
7	Newborn	2,831	1,078	1,075	10	23	77.6%	33.7%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	52,029	12,260	12,218	173	222	82.4%	64.2%
	TOTAL INPATIENT BED UTILIZATION	54,860	13,338	13,293	183	245	82.1%	61.3%
	TOTAL INPATIENT REPORTED YEAR	54,860	13,338	13,293	183	245	82.1%	61.3%
	TOTAL INPATIENT PRIOR YEAR	58,224	13,617	13,583	192	245	83.1%	65.1%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-3,364	-279	-290	-9	0	-1.0%	-3.8%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-6%	-2%	-2%	-5%	0%	-1%	-6%
	Total Licensed Beds and Bassinets	297						
(A) This number may not exceed the number of available beds for each department or in total.								
Note: Total discharges do not include ICU/CCU patients.								

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	7,134	6,705	-429	-6%
2	Outpatient Scans (Excluding Emergency Department Scans)	10,658	11,363	705	7%
3	Emergency Department Scans	11,719	12,483	764	7%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	29,511	30,551	1,040	4%
B. MRI Scans (A)					
1	Inpatient Scans	1,787	1,511	-276	-15%
2	Outpatient Scans (Excluding Emergency Department Scans)	10,200	10,718	518	5%
3	Emergency Department Scans	284	329	45	16%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	12,271	12,558	287	2%
C. PET Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	0	0	0	0%
D. PET/CT Scans (A)					
1	Inpatient Scans	2	0	-2	-100%
2	Outpatient Scans (Excluding Emergency Department Scans)	506	568	62	12%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	508	568	60	12%
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
E. Linear Accelerator Procedures					
1	Inpatient Procedures	155	71	-84	-54%
2	Outpatient Procedures	6,417	6,346	-71	-1%
	Total Linear Accelerator Procedures	6,572	6,417	-155	-2%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	101	39	-62	-61%
2	Outpatient Procedures	212	150	-62	-29%
	Total Cardiac Catheterization Procedures	313	189	-124	-40%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	Total Cardiac Angioplasty Procedures	0	0	0	0%
H. Electrophysiology Studies					

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	Total Electrophysiology Studies	0	0	0	0%
I.	<u>Surgical Procedures</u>				
1	Inpatient Surgical Procedures	2,634	2,555	-79	-3%
2	Outpatient Surgical Procedures	4,865	5,250	385	8%
	Total Surgical Procedures	7,499	7,805	306	4%
J.	<u>Endoscopy Procedures</u>				
1	Inpatient Endoscopy Procedures	951	997	46	5%
2	Outpatient Endoscopy Procedures	2,256	2,361	105	5%
	Total Endoscopy Procedures	3,207	3,358	151	5%
K.	<u>Hospital Emergency Room Visits</u>				
1	Emergency Room Visits: Treated and Admitted	8,263	7,940	-323	-4%
2	Emergency Room Visits: Treated and Discharged	79,563	77,256	-2,307	-3%
	Total Emergency Room Visits	87,826	85,196	-2,630	-3%
L.	<u>Hospital Clinic Visits</u>				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	35,449	38,267	2,818	8%
4	Medical Clinic Visits	0	0	0	0%
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0%
6	Medical Clinic Visits - Urgent Care Clinic	0	0	0	0%
7	Medical Clinic Visits - Family Practice Clinic	32,854	33,691	837	3%
8	Medical Clinic Visits - Other Medical Clinics	26,575	27,390	815	3%
9	Specialty Clinic Visits	0	0	0	0%
10	Specialty Clinic Visits - Cardiac Clinic	0	0	0	0%
11	Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	0%
12	Specialty Clinic Visits - OB-GYN Clinic	0	0	0	0%
13	Specialty Clinic Visits - Other Speciality Clinics	6,055	5,673	-382	-6%
	Total Hospital Clinic Visits	100,933	105,021	4,088	4%
M.	<u>Other Hospital Outpatient Visits</u>				
1	Rehabilitation (PT/OT/ST)	59,350	63,188	3,838	6%
2	Cardiac Rehabilitation	4,030	4,636	606	15%
3	Chemotherapy	595	683	88	15%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	407,789	407,959	170	0%
	Total Other Hospital Outpatient Visits	471,764	476,466	4,702	1%
N.	<u>Hospital Full Time Equivalent Employees</u>				
1	Total Nursing FTEs	540.2	500.8	-39.4	-7%
2	Total Physician FTEs	137.3	139.3	2.0	1%
3	Total Non-Nursing and Non-Physician FTEs	1,429.7	1,464.2	34.5	2%
	Total Hospital Full Time Equivalent Employees	2,107.2	2,104.3	-2.9	0%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2015	FY 2016	DIFFERENCE	DIFFERENCE
A. Outpatient Surgical Procedures					
1	MH OP Center Saybrook Road	2,000	2,052	52	3%
2	Middlesex Hospital	2,865	3,198	333	12%
	Total Outpatient Surgical Procedures(A)	4,865	5,250	385	8%
B. Outpatient Endoscopy Procedures					
1	MH Shoreline Oscopy Room	0	0	0	0%
2	Middlesex Hospital	2,256	2,361	105	5%
	Total Outpatient Endoscopy Procedures(B)	2,256	2,361	105	5%
C. Outpatient Hospital Emergency Room Visits					
1	MH Marlborough ED	19,891	19,686	-205	-1%
2	MH Shoreline ED	20,686	20,151	-535	-3%
3	Middlesex Hospital ED	38,986	37,419	-1,567	-4%
	Total Outpatient Hospital Emergency Room Visits(C)	79,563	77,256	-2,307	-3%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$333,227,086	\$311,983,193	(\$21,243,893)	-6%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$75,470,428	\$75,253,837	(\$216,591)	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	22.65%	24.12%	1.47%	7%
4	DISCHARGES	7,504	7,137	(367)	-5%
5	CASE MIX INDEX (CMI)	1.42635	1.49300	0.06665	5%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	10,703.33040	10,655.54100	(47.78940)	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,051.12	\$7,062.41	\$11.30	0%
8	PATIENT DAYS	34,831	32,103	(2,728)	-8%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,166.76	\$2,344.14	\$177.38	8%
10	AVERAGE LENGTH OF STAY	4.6	4.5	(0.1)	-3%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$267,467,305	\$297,955,174	\$30,487,869	11%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$57,456,589	\$62,672,638	\$5,216,049	9%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	21.48%	21.03%	-0.45%	-2%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	80.27%	95.50%	15.24%	19%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	6,023.14380	6,816.09178	792.94798	13%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,539.30	\$9,194.81	(\$344.50)	-4%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$600,694,391	\$609,938,367	\$9,243,976	2%
18	TOTAL ACCRUED PAYMENTS	\$132,927,017	\$137,926,475	\$4,999,458	4%
19	TOTAL ALLOWANCES	\$467,767,374	\$472,011,892	\$4,244,518	1%
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
NON-GOVERNMENT INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$145,819,781	\$148,962,902	\$3,143,121	2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$67,652,225	\$76,562,693	\$8,910,468	13%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	46.39%	51.40%	5.00%	11%
4	DISCHARGES	3,800	3,908	108	3%
5	CASE MIX INDEX (CMI)	1.27619	1.35110	0.07491	6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	4,849.52200	5,280.09880	430.57680	9%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$13,950.29	\$14,500.24	\$549.95	4%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$6,899.17)	(\$7,437.83)	(\$538.65)	8%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$33,457,681)	(\$39,272,452)	(\$5,814,771)	17%
10	PATIENT DAYS	13,174	13,175	1	0%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$5,135.28	\$5,811.21	\$675.93	13%
12	AVERAGE LENGTH OF STAY	3.5	3.4	(0.1)	-3%
NON-GOVERNMENT OUTPATIENT					

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2015	FY 2016	DIFFERENCE	DIFFERENCE
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$308,072,462	\$320,703,218	\$12,630,756	4%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$126,327,273	\$132,818,781	\$6,491,508	5%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	41.01%	41.41%	0.41%	1%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	211.27%	215.29%	4.02%	2%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	8,028.23422	8,413.55907	385.32486	5%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$15,735.37	\$15,786.28	\$50.90	0%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$6,196.07)	(\$6,591.47)	(\$395.40)	6%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$49,743,521)	(\$55,457,742)	(\$5,714,221)	11%
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)				
21	TOTAL ACCRUED CHARGES	\$453,892,243	\$469,666,120	\$15,773,877	3%
22	TOTAL ACCRUED PAYMENTS	\$193,979,498	\$209,381,474	\$15,401,976	8%
23	TOTAL ALLOWANCES	\$259,912,745	\$260,284,646	\$371,901	0%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$83,201,202)	(\$94,730,194)	(\$11,528,992)	14%
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA				
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$414,756,036	\$431,645,780	\$16,889,744	4%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$192,747,761	\$212,412,449	\$19,664,688	10%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$222,008,275	\$219,233,331	(\$2,774,944)	-1%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	53.53%	50.79%	-2.74%	
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$3,849,533	\$4,146,655	\$297,122	8%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,360,408	\$1,130,602	(\$229,806)	-17%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	35.34%	27.27%	-8.07%	-23%
4	DISCHARGES	92	123	31	34%
5	CASE MIX INDEX (CMI)	1.33100	1.24710	(0.08390)	-6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	122.45200	153.39330	30.94130	25%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$11,109.72	\$7,370.61	(\$3,739.12)	-34%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$2,840.56	\$7,129.63	\$4,289.07	151%
9	MEDICARE - UNINSURED IP PMT / CMAD	(\$4,058.61)	(\$308.20)	\$3,750.41	-92%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$496,985)	(\$47,275)	\$449,710	-90%
11	PATIENT DAYS	394	485	91	23%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,452.81	\$2,331.14	(\$1,121.67)	-32%
13	AVERAGE LENGTH OF STAY	4.3	3.9	(0.3)	-8%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$11,030,087	\$10,302,803	(\$727,284)	-7%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,492,116	\$1,943,917	(\$548,199)	-22%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	22.59%	18.87%	-3.73%	-16%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	286.53%	248.46%	-38.07%	-13%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	263.60808	305.60651	41.99843	16%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,453.87	\$6,360.85	(\$3,093.02)	-33%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$6,281.51	\$9,425.43	\$3,143.92	50%
21	MEDICARE - UNINSURED OP PMT / OPED	\$85.43	\$2,833.96	\$2,748.52	3217%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$22,521	\$866,075	\$843,554	3746%
UNINSURED TOTALS (INPATIENT AND OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$14,879,620	\$14,449,458	(\$430,162)	-3%
24	TOTAL ACCRUED PAYMENTS	\$3,852,524	\$3,074,519	(\$778,005)	-20%
25	TOTAL ALLOWANCES	\$11,027,096	\$11,374,939	\$347,843	3%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$474,464)	\$818,800	\$1,293,264	-273%
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$76,836,069	\$72,029,066	(\$4,807,003)	-6%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$13,013,835	\$12,981,508	(\$32,327)	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	16.94%	18.02%	1.09%	6%
4	DISCHARGES	2,251	2,228	(23)	-1%
5	CASE MIX INDEX (CMI)	1.07462	1.14010	0.06548	6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,418.96962	2,540.14280	121.17318	5%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,379.91	\$5,110.54	(\$269.37)	-5%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$8,570.38	\$9,389.70	\$819.32	10%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$1,671.21	\$1,951.87	\$280.66	17%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,042,601	\$4,958,031	\$915,430	23%
11	PATIENT DAYS	10,039	9,360	(679)	-7%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,296.33	\$1,386.91	\$90.59	7%
13	AVERAGE LENGTH OF STAY	4.5	4.2	(0.3)	-6%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$127,898,287	\$130,532,218	\$2,633,931	2%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$20,645,716	\$21,148,262	\$502,546	2%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	16.14%	16.20%	0.06%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	166.46%	181.22%	14.77%	9%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,746.92573	4,037.61700	290.69127	8%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,510.04	\$5,237.81	(\$272.23)	-5%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$10,225.33	\$10,548.47	\$323.14	3%
21	MEDICARE - MEDICAID OP PMT / OPED	\$4,029.26	\$3,957.00	(\$72.26)	-2%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$15,097,341	\$15,976,841	\$879,500	6%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$204,734,356	\$202,561,284	(\$2,173,072)	-1%
24	TOTAL ACCRUED PAYMENTS	\$33,659,551	\$34,129,770	\$470,219	1%
25	TOTAL ALLOWANCES	\$171,074,805	\$168,431,514	(\$2,643,291)	-2%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$19,139,942	\$20,934,872	\$1,794,930	9%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
E. OTHER MEDICAL ASSISTANCE (O.M.A.)					
OTHER MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	-	-	-	0%
5	CASE MIX INDEX (CMI)	0.00000	0.00000	0.00000	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$13,950.29	\$14,500.24	\$549.95	4%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$7,051.12	\$7,062.41	\$11.30	0%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
11	PATIENT DAYS	0	0	-	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	-	-	-	0%
OTHER MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$0	\$0	\$0	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.00000	0.00000	0.00000	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$15,735.37	\$15,786.28	\$50.90	0%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$9,539.30	\$9,194.81	(\$344.50)	-4%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$0	\$0	\$0	0%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%
F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
TOTAL MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$76,836,069	\$72,029,066	(\$4,807,003)	-6%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$13,013,835	\$12,981,508	(\$32,327)	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	16.94%	18.02%	1.09%	6%
4	DISCHARGES	2,251	2,228	(23)	-1%
5	CASE MIX INDEX (CMI)	1.07462	1.14010	0.06548	6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,418.96962	2,540.14280	121.17318	5%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,379.91	\$5,110.54	(\$269.37)	-5%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$8,570.38	\$9,389.70	\$819.32	10%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$1,671.21	\$1,951.87	\$280.66	17%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,042,601	\$4,958,031	\$915,430	23%
11	PATIENT DAYS	10,039	9,360	(679)	-7%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,296.33	\$1,386.91	\$90.59	7%
13	AVERAGE LENGTH OF STAY	4.5	4.2	(0.3)	-6%
<u>TOTAL MEDICAL ASSISTANCE OUTPATIENT</u>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$127,898,287	\$130,532,218	\$2,633,931	2%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$20,645,716	\$21,148,262	\$502,546	2%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	16.14%	16.20%	0.06%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	166.46%	181.22%	14.77%	9%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,746.92573	4,037.61700	290.69127	8%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,510.04	\$5,237.81	(\$272.23)	-5%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$10,225.33	\$10,548.47	\$323.14	3%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$4,029.26	\$3,957.00	(\$72.26)	-2%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$15,097,341	\$15,976,841	\$879,500	6%
<u>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u>					
23	TOTAL ACCRUED CHARGES	\$204,734,356	\$202,561,284	(\$2,173,072)	-1%
24	TOTAL ACCRUED PAYMENTS	\$33,659,551	\$34,129,770	\$470,219	1%
25	TOTAL ALLOWANCES	\$171,074,805	\$168,431,514	(\$2,643,291)	-2%
<u>G. CHAMPUS / TRICARE</u>					
<u>CHAMPUS / TRICARE INPATIENT</u>					
1	INPATIENT ACCRUED CHARGES	\$1,934,851	\$1,856,087	(\$78,764)	-4%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$373,735	\$410,282	\$36,547	10%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	19.32%	22.10%	2.79%	14%
4	DISCHARGES	62	65	3	5%
5	CASE MIX INDEX (CMI)	1.22936	1.02620	(0.20316)	-17%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	76.22032	66.70300	(9.51732)	-12%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,903.35	\$6,150.88	\$1,247.53	25%
8	PATIENT DAYS	180	222	42	23%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,076.31	\$1,848.12	(\$228.19)	-11%
10	AVERAGE LENGTH OF STAY	2.9	3.4	0.5	18%
<u>CHAMPUS / TRICARE OUTPATIENT</u>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$3,663,118	\$3,518,578	(\$144,540)	-4%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$599,314	\$586,459	(\$12,855)	-2%
<u>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</u>					
13	TOTAL ACCRUED CHARGES	\$5,597,969	\$5,374,665	(\$223,304)	-4%
14	TOTAL ACCRUED PAYMENTS	\$973,049	\$996,741	\$23,692	2%
15	TOTAL ALLOWANCES	\$4,624,920	\$4,377,924	(\$246,996)	-5%
<u>H. OTHER DATA</u>					

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
1	OTHER OPERATING REVENUE	\$13,366,834	\$11,182,242	(\$2,184,592)	-16%
2	TOTAL OPERATING EXPENSES	\$365,751,321	\$366,705,400	\$954,079	0%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
<u>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</u>					
4	CHARITY CARE (CHARGES)	\$6,695,669	\$5,726,046	(\$969,623)	-14%
5	BAD DEBTS (CHARGES)	\$10,271,353	\$10,993,577	\$722,224	7%
6	UNCOMPENSATED CARE (CHARGES)	\$16,967,022	\$16,719,623	(\$247,399)	-1%
7	COST OF UNCOMPENSATED CARE	\$4,921,161	\$5,072,258	\$151,097	3%
<u>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</u>					
8	TOTAL ACCRUED CHARGES	\$204,734,356	\$202,561,284	(\$2,173,072)	-1%
9	TOTAL ACCRUED PAYMENTS	\$33,659,551	\$34,129,770	\$470,219	1%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$59,381,707	\$61,451,328	\$2,069,621	3%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$25,722,156	\$27,321,558	\$1,599,402	6%
II. <u>AGGREGATE DATA</u>					
A. <u>TOTALS - ALL PAYERS</u>					
1	TOTAL INPATIENT CHARGES	\$557,817,787	\$534,831,248	(\$22,986,539)	-4%
2	TOTAL INPATIENT PAYMENTS	\$156,510,223	\$165,208,320	\$8,698,097	6%
3	TOTAL INPATIENT PAYMENTS / CHARGES	28.06%	30.89%	2.83%	10%
4	TOTAL DISCHARGES	13,617	13,338	(279)	-2%
5	TOTAL CASE MIX INDEX	1.32541	1.39020	0.06479	5%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	18,048.04234	18,542.48560	494.44326	3%
7	TOTAL OUTPATIENT CHARGES	\$707,101,172	\$752,709,188	\$45,608,016	6%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	126.76%	140.74%	13.98%	11%
9	TOTAL OUTPATIENT PAYMENTS	\$205,028,892	\$217,226,140	\$12,197,248	6%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	29.00%	28.86%	-0.14%	0%
11	TOTAL CHARGES	\$1,264,918,959	\$1,287,540,436	\$22,621,477	2%
12	TOTAL PAYMENTS	\$361,539,115	\$382,434,460	\$20,895,345	6%
13	TOTAL PAYMENTS / TOTAL CHARGES	28.58%	29.70%	1.12%	4%
14	PATIENT DAYS	58,224	54,860	(3,364)	-6%
B. <u>TOTALS - ALL GOVERNMENT PAYERS</u>					
1	INPATIENT CHARGES	\$411,998,006	\$385,868,346	(\$26,129,660)	-6%
2	INPATIENT PAYMENTS	\$88,857,998	\$88,645,627	(\$212,371)	0%
3	GOVT. INPATIENT PAYMENTS / CHARGES	21.57%	22.97%	1.41%	7%
4	DISCHARGES	9,817	9,430	(387)	-4%
5	CASE MIX INDEX	1.34446	1.40640	0.06195	5%
6	CASE MIX ADJUSTED DISCHARGES	13,198.52034	13,262.38680	63.86646	0%
7	OUTPATIENT CHARGES	\$399,028,710	\$432,005,970	\$32,977,260	8%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	96.85%	111.96%	15.10%	16%
9	OUTPATIENT PAYMENTS	\$78,701,619	\$84,407,359	\$5,705,740	7%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	19.72%	19.54%	-0.18%	-1%
11	TOTAL CHARGES	\$811,026,716	\$817,874,316	\$6,847,600	1%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
12	TOTAL PAYMENTS	\$167,559,617	\$173,052,986	\$5,493,369	3%
13	TOTAL PAYMENTS / CHARGES	20.66%	21.16%	0.50%	2%
14	PATIENT DAYS	45,050	41,685	(3,365)	-7%
15	TOTAL GOVERNMENT DEDUCTIONS	\$643,467,099	\$644,821,330	\$1,354,231	0%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	4.6	4.5	(0.1)	-3%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.5	3.4	(0.1)	-3%
3	UNINSURED	4.3	3.9	(0.3)	-8%
4	MEDICAID	4.5	4.2	(0.3)	-6%
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%
6	CHAMPUS / TRICARE	2.9	3.4	0.5	18%
7	TOTAL AVERAGE LENGTH OF STAY	4.3	4.1	(0.2)	-4%
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$1,264,918,959	\$1,287,540,436	\$22,621,477	2%
2	TOTAL GOVERNMENT DEDUCTIONS	\$643,467,099	\$644,821,330	\$1,354,231	0%
3	UNCOMPENSATED CARE	\$16,967,022	\$16,719,623	(\$247,399)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$222,008,275	\$219,233,331	(\$2,774,944)	-1%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$15,596,046	\$16,163,032	\$566,986	4%
6	TOTAL ADJUSTMENTS	\$898,038,442	\$896,937,316	(\$1,101,126)	0%
7	TOTAL ACCRUED PAYMENTS	\$366,880,517	\$390,603,120	\$23,722,603	6%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$366,880,517	\$390,603,120	\$23,722,603	6%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.2900427054	0.3033715362	0.0133288308	5%
11	COST OF UNCOMPENSATED CARE	\$4,921,161	\$5,072,258	\$151,097	3%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$25,722,156	\$27,321,558	\$1,599,402	6%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$30,643,316	\$32,393,816	\$1,750,499	6%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$15,097,341	\$15,976,841	\$879,500	6%
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	(\$474,464)	\$818,800	\$1,293,264	-273%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$14,622,877	\$16,795,641	\$2,172,764	15%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$21,618,618	\$22,328,510	\$709,892	3.28%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	(\$3,902,482)	(\$2,327,394)	\$1,575,088	-40.36%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$357,636,636	\$380,107,064	\$22,470,428	6.28%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2015	FY 2016	DIFFERENCE	DIFFERENCE
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$1,264,918,959	\$1,287,540,436	\$22,621,477	1.79%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$16,967,022	\$16,719,623	(\$247,399)	-1.46%

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE
I. ACCRUED CHARGES AND PAYMENTS				
A. INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$145,819,781	\$148,962,902	\$3,143,121
2	MEDICARE	\$333,227,086	311,983,193	(\$21,243,893)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$76,836,069	72,029,066	(\$4,807,003)
4	MEDICAID	\$76,836,069	72,029,066	(\$4,807,003)
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$1,934,851	1,856,087	(\$78,764)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,849,533	4,146,655	\$297,122
	TOTAL INPATIENT GOVERNMENT CHARGES	\$411,998,006	\$385,868,346	(\$26,129,660)
	TOTAL INPATIENT CHARGES	\$557,817,787	\$534,831,248	(\$22,986,539)
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$308,072,462	\$320,703,218	\$12,630,756
2	MEDICARE	\$267,467,305	297,955,174	\$30,487,869
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$127,898,287	130,532,218	\$2,633,931
4	MEDICAID	\$127,898,287	130,532,218	\$2,633,931
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$3,663,118	3,518,578	(\$144,540)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$11,030,087	10,302,803	(\$727,284)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$399,028,710	\$432,005,970	\$32,977,260
	TOTAL OUTPATIENT CHARGES	\$707,101,172	\$752,709,188	\$45,608,016
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$453,892,243	\$469,666,120	\$15,773,877
2	TOTAL MEDICARE	\$600,694,391	609,938,367	\$9,243,976
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$204,734,356	\$202,561,284	(\$2,173,072)
4	TOTAL MEDICAID	\$204,734,356	\$202,561,284	(\$2,173,072)
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$5,597,969	\$5,374,665	(\$223,304)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$14,879,620	\$14,449,458	(\$430,162)
	TOTAL GOVERNMENT CHARGES	\$811,026,716	\$817,874,316	\$6,847,600
	TOTAL CHARGES	\$1,264,918,959	\$1,287,540,436	\$22,621,477
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$67,652,225	\$76,562,693	\$8,910,468
2	MEDICARE	\$75,470,428	75,253,837	(\$216,591)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$13,013,835	12,981,508	(\$32,327)
4	MEDICAID	\$13,013,835	12,981,508	(\$32,327)
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$373,735	410,282	\$36,547
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,360,408	1,130,602	(\$229,806)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$88,857,998	\$88,645,627	(\$212,371)
	TOTAL INPATIENT PAYMENTS	\$156,510,223	\$165,208,320	\$8,698,097
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$126,327,273	\$132,818,781	\$6,491,508
2	MEDICARE	\$57,456,589	62,672,638	\$5,216,049
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$20,645,716	21,148,262	\$502,546
4	MEDICAID	\$20,645,716	21,148,262	\$502,546
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$599,314	586,459	(\$12,855)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,492,116	1,943,917	(\$548,199)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$78,701,619	\$84,407,359	\$5,705,740
	TOTAL OUTPATIENT PAYMENTS	\$205,028,892	\$217,226,140	\$12,197,248
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$193,979,498	\$209,381,474	\$15,401,976
2	TOTAL MEDICARE	\$132,927,017	\$137,926,475	\$4,999,458
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$33,659,551	\$34,129,770	\$470,219
4	TOTAL MEDICAID	\$33,659,551	\$34,129,770	\$470,219

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$973,049	\$996,741	\$23,692
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,852,524	\$3,074,519	(\$778,005)
	TOTAL GOVERNMENT PAYMENTS	\$167,559,617	\$173,052,986	\$5,493,369
	TOTAL PAYMENTS	\$361,539,115	\$382,434,460	\$20,895,345
II. PAYER MIX				
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	11.53%	11.57%	0.04%
2	MEDICARE	26.34%	24.23%	-2.11%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.07%	5.59%	-0.48%
4	MEDICAID	6.07%	5.59%	-0.48%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.15%	0.14%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.30%	0.32%	0.02%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	32.57%	29.97%	-2.60%
	TOTAL INPATIENT PAYER MIX	44.10%	41.54%	-2.56%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	24.36%	24.91%	0.55%
2	MEDICARE	21.15%	23.14%	2.00%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10.11%	10.14%	0.03%
4	MEDICAID	10.11%	10.14%	0.03%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.29%	0.27%	-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.87%	0.80%	-0.07%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	31.55%	33.55%	2.01%
	TOTAL OUTPATIENT PAYER MIX	55.90%	58.46%	2.56%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.71%	20.02%	1.31%
2	MEDICARE	20.87%	19.68%	-1.20%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.60%	3.39%	-0.21%
4	MEDICAID	3.60%	3.39%	-0.21%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.10%	0.11%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.38%	0.30%	-0.08%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	24.58%	23.18%	-1.40%
	TOTAL INPATIENT PAYER MIX	43.29%	43.20%	-0.09%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	34.94%	34.73%	-0.21%
2	MEDICARE	15.89%	16.39%	0.50%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.71%	5.53%	-0.18%
4	MEDICAID	5.71%	5.53%	-0.18%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.17%	0.15%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.69%	0.51%	-0.18%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	21.77%	22.07%	0.30%
	TOTAL OUTPATIENT PAYER MIX	56.71%	56.80%	0.09%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,800	3,908	108
2	MEDICARE	7,504	7,137	(367)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,251	2,228	(23)
4	MEDICAID	2,251	2,228	(23)
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	62	65	3
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	92	123	31
	TOTAL GOVERNMENT DISCHARGES	9,817	9,430	(387)
	TOTAL DISCHARGES	13,617	13,338	(279)
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	13,174	13,175	1
2	MEDICARE	34,831	32,103	(2,728)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10,039	9,360	(679)
4	MEDICAID	10,039	9,360	(679)
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	180	222	42
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	394	485	91
	TOTAL GOVERNMENT PATIENT DAYS	45,050	41,685	(3,365)
	TOTAL PATIENT DAYS	58,224	54,860	(3,364)
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.5	3.4	(0.1)
2	MEDICARE	4.6	4.5	(0.1)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.5	4.2	(0.3)
4	MEDICAID	4.5	4.2	(0.3)
5	OTHER MEDICAL ASSISTANCE	0.0	0.0	-
6	CHAMPUS / TRICARE	2.9	3.4	0.5
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.3	3.9	(0.3)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.6	4.4	(0.2)
	TOTAL AVERAGE LENGTH OF STAY	4.3	4.1	(0.2)
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.27619	1.35110	0.07491
2	MEDICARE	1.42635	1.49300	0.06665
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.07462	1.14010	0.06548
4	MEDICAID	1.07462	1.14010	0.06548
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	1.22936	1.02620	(0.20316)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.33100	1.24710	(0.08390)
	TOTAL GOVERNMENT CASE MIX INDEX	1.34446	1.40640	0.06195
	TOTAL CASE MIX INDEX	1.32541	1.39020	0.06479
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$414,756,036	\$431,645,780	\$16,889,744
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$192,747,761	\$212,412,449	\$19,664,688
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$222,008,275	\$219,233,331	(\$2,774,944)
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	53.53%	50.79%	-2.74%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$21,618,618	\$22,328,510	\$709,892
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$15,596,046	\$16,163,032	\$566,986
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT)	\$0	\$0	\$0

MIDDLESEX HOSPITAL				
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FISCAL YEAR 2016				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE
8	CHARITY CARE	\$6,695,669	\$5,726,046	(\$969,623)
9	BAD DEBTS	\$10,271,353	\$10,993,577	\$722,224
10	TOTAL UNCOMPENSATED CARE	\$16,967,022	\$16,719,623	(\$247,399)
11	TOTAL OTHER OPERATING REVENUE	\$13,366,834	\$11,182,242	(\$2,184,592)
12	TOTAL OPERATING EXPENSES	\$365,751,321	\$366,705,400	\$954,079
IV. DSH UPPER PAYMENT LIMIT CALCULATIONS				
A. CASE MIX ADJUSTED DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,849.52200	5,280.09880	430.57680
2	MEDICARE	10,703.33040	10,655.54100	(47.78940)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,418.96962	2,540.14280	121.17318
4	MEDICAID	2,418.96962	2,540.14280	121.17318
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	76.22032	66.70300	(9.51732)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	122.45200	153.39330	30.94130
TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES		13,198.52034	13,262.38680	63.86646
TOTAL CASE MIX ADJUSTED DISCHARGES		18,048.04234	18,542.48560	494.44326
B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	8,028.23422	8,413.55907	385.32486
2	MEDICARE	6,023.14380	6,816.09178	792.94798
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,746.92573	4,037.61700	290.69127
4	MEDICAID	3,746.92573	4,037.61700	290.69127
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	117.38026	123.22029	5.84002
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	263.60808	305.60651	41.99843
TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES		9,887.44979	10,976.92907	1,089.47928
TOTAL OUTPATIENT EQUIVALENT DISCHARGES		17,915.68401	19,390.48814	1,474.80413
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$13,950.29	\$14,500.24	\$549.95
2	MEDICARE	\$7,051.12	\$7,062.41	\$11.30
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,379.91	\$5,110.54	(\$269.37)
4	MEDICAID	\$5,379.91	\$5,110.54	(\$269.37)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$4,903.35	\$6,150.88	\$1,247.53
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$11,109.72	\$7,370.61	(\$3,739.12)
TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE		\$6,732.42	\$6,683.99	(\$48.43)
TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE		\$8,671.87	\$8,909.72	\$237.85
D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$15,735.37	\$15,786.28	\$50.90
2	MEDICARE	\$9,539.30	\$9,194.81	(\$344.50)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,510.04	\$5,237.81	(\$272.23)
4	MEDICAID	\$5,510.04	\$5,237.81	(\$272.23)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$5,105.75	\$4,759.44	(\$346.31)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$9,453.87	\$6,360.85	(\$3,093.02)
TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE		\$7,959.75	\$7,689.52	(\$270.23)
TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE		\$11,444.10	\$11,202.72	(\$241.38)
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$15,097,341	\$15,976,841	\$879,500
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	(\$474,464)	\$818,800	\$1,293,264
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$14,622,877	\$16,795,641	\$2,172,764
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$1,264,918,959	\$1,287,540,436	\$22,621,477
2	TOTAL GOVERNMENT DEDUCTIONS	\$643,467,099	\$644,821,330	\$1,354,231
3	UNCOMPENSATED CARE	\$16,967,022	\$16,719,623	(\$247,399)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$222,008,275	\$219,233,331	(\$2,774,944)
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$15,596,046	\$16,163,032	\$566,986
6	TOTAL ADJUSTMENTS	\$898,038,442	\$896,937,316	(\$1,101,126)
7	TOTAL ACCRUED PAYMENTS	\$366,880,517	\$390,603,120	\$23,722,603
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$366,880,517	\$390,603,120	\$23,722,603
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.2900427054	0.3033715362	0.0133288308
11	COST OF UNCOMPENSATED CARE	\$4,921,161	\$5,072,258	\$151,097
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$25,722,156	\$27,321,558	\$1,599,402
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$30,643,316	\$32,393,816	\$1,750,499
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	46.39%	51.40%	5.00%
2	MEDICARE	22.65%	24.12%	1.47%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	16.94%	18.02%	1.09%
4	MEDICAID	16.94%	18.02%	1.09%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	19.32%	22.10%	2.79%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	35.34%	27.27%	-8.07%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	21.57%	22.97%	1.41%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	28.06%	30.89%	2.83%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	41.01%	41.41%	0.41%
2	MEDICARE	21.48%	21.03%	-0.45%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	16.14%	16.20%	0.06%
4	MEDICAID	16.14%	16.20%	0.06%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	16.36%	16.67%	0.31%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	22.59%	18.87%	-3.73%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	19.72%	19.54%	-0.18%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	29.00%	28.86%	-0.14%
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$361,539,115	\$382,434,460	\$20,895,345
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$361,539,115	\$382,434,460	\$20,895,345
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$3,902,482)	(\$2,327,394)	\$1,575,088
4	CALCULATED NET REVENUE	\$373,930,558	\$380,107,066	\$6,176,508
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$357,636,636	\$380,107,064	\$22,470,428

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$16,293,922	\$2	(\$16,293,920)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$1,264,918,959	\$1,287,540,436	\$22,621,477
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$1,264,918,959	\$1,287,540,436	\$22,621,477
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,264,918,959	\$1,287,540,436	\$22,621,477
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$16,967,022	\$16,719,623	(\$247,399)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$16,967,022	\$16,719,623	(\$247,399)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$16,967,022	\$16,719,623	(\$247,399)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES

(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2016
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$148,962,902
2	MEDICARE	311,983,193
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	72,029,066
4	MEDICAID	72,029,066
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	1,856,087
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4,146,655
	TOTAL INPATIENT GOVERNMENT CHARGES	\$385,868,346
	TOTAL INPATIENT CHARGES	\$534,831,248
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$320,703,218
2	MEDICARE	297,955,174
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	130,532,218
4	MEDICAID	130,532,218
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	3,518,578
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	10,302,803
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$432,005,970
	TOTAL OUTPATIENT CHARGES	\$752,709,188
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$469,666,120
2	TOTAL GOVERNMENT ACCRUED CHARGES	817,874,316
	TOTAL ACCRUED CHARGES	\$1,287,540,436
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$76,562,693
2	MEDICARE	75,253,837
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12,981,508
4	MEDICAID	12,981,508
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	410,282
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,130,602
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$88,645,627
	TOTAL INPATIENT PAYMENTS	\$165,208,320
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$132,818,781
2	MEDICARE	62,672,638
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	21,148,262
4	MEDICAID	21,148,262
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	586,459
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,943,917
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$84,407,359
	TOTAL OUTPATIENT PAYMENTS	\$217,226,140
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$209,381,474
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	173,052,986
	TOTAL ACCRUED PAYMENTS	\$382,434,460

MIDDLESEX HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2016		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2016
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,908
2	MEDICARE	7,137
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,228
4	MEDICAID	2,228
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	65
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	123
	TOTAL GOVERNMENT DISCHARGES	9,430
	TOTAL DISCHARGES	13,338
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.35110
2	MEDICARE	1.49300
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.14010
4	MEDICAID	1.14010
5	OTHER MEDICAL ASSISTANCE	0.00000
6	CHAMPUS / TRICARE	1.02620
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.24710
	TOTAL GOVERNMENT CASE MIX INDEX	1.40640
	TOTAL CASE MIX INDEX	1.39020
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$431,645,780
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$212,412,449
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$219,233,331
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	50.79%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$22,328,510
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$16,163,032
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$5,726,046
9	BAD DEBTS	\$10,993,577
10	TOTAL UNCOMPENSATED CARE	\$16,719,623
11	TOTAL OTHER OPERATING REVENUE	\$11,182,242
12	TOTAL OPERATING EXPENSES	\$366,705,400
III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS		
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	TOTAL ACCRUED PAYMENTS	\$382,434,460
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$382,434,460
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$2,327,394)
	CALCULATED NET REVENUE	\$380,107,066
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$380,107,064

MIDDLESEX HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2016		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2016
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$2
B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$1,287,540,436
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$1,287,540,436
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,287,540,436
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$16,719,623
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$16,719,623
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$16,719,623
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
A. <u>Hospital Charity Care (from HRS Report 500)</u>					
1	Number of Applicants	3,035	3,018	(17)	-1%
2	Number of Approved Applicants	2,007	2,027	20	1%
3	Total Charges (A)	\$6,695,669	\$5,726,046	(\$969,623)	-14%
4	Average Charges	\$3,336	\$2,825	(\$511)	-15%
5	Ratio of Cost to Charges (RCC)	0.269198	0.286126	0.016928	6%
6	Total Cost	\$1,802,461	\$1,638,371	(\$164,090)	-9%
7	Average Cost	\$898	\$808	(\$90)	-10%
8	Charity Care - Inpatient Charges	\$2,055,675	\$1,586,244	(\$469,431)	-23%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	2,360,871	1,635,662	(725,209)	-31%
10	Charity Care - Emergency Department Charges	2,279,123	2,504,140	225,017	10%
11	Total Charges (A)	\$6,695,669	\$5,726,046	(\$969,623)	-14%
12	Charity Care - Number of Patient Days	188	162	(26)	-14%
13	Charity Care - Number of Discharges	58	41	(17)	-29%
14	Charity Care - Number of Outpatient ED Visits	746	502	(244)	-33%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	1,093	646	(447)	-41%
B. <u>Hospital Bad Debts (from HRS Report 500)</u>					
1	Bad Debts - Inpatient Services	\$2,458,609	\$3,013,208	\$554,599	23%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	1,987,267	1,701,438	(285,829)	-14%
3	Bad Debts - Emergency Department	5,825,477	6,278,931	453,454	8%
4	Total Bad Debts (A)	\$10,271,353	\$10,993,577	\$722,224	7%
C. <u>Hospital Uncompensated Care (from HRS Report 500)</u>					
1	Charity Care (A)	\$6,695,669	\$5,726,046	(\$969,623)	-14%
2	Bad Debts (A)	10,271,353	10,993,577	722,224	7%
3	Total Uncompensated Care (A)	\$16,967,022	\$16,719,623	(\$247,399)	-1%
4	Uncompensated Care - Inpatient Services	\$4,514,284	\$4,599,452	\$85,168	2%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	4,348,138	3,337,100	(1,011,038)	-23%
6	Uncompensated Care - Emergency Department	8,104,600	8,783,071	678,471	8%
7	Total Uncompensated Care (A)	\$16,967,022	\$16,719,623	(\$247,399)	-1%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

MIDDLESEX HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCURED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3) FY 2015	(4) FY 2016	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$414,756,036	\$431,645,780	\$16,889,744	4%
2	Total Contractual Allowances	\$222,008,275	\$219,233,331	(\$2,774,944)	-1%
	Total Accrued Payments (A)	\$192,747,761	\$212,412,449	\$19,664,688	10%
	Total Discount Percentage	53.53%	50.79%	-2.74%	-5%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	ACTUAL FY 2016
A.	<u>Gross and Net Revenue</u>			
1	Inpatient Gross Revenue	\$579,045,370	\$557,817,787	\$534,831,248
2	Outpatient Gross Revenue	\$693,180,237	\$707,101,172	\$752,709,188
3	Total Gross Patient Revenue	\$1,272,225,607	\$1,264,918,959	\$1,287,540,436
4	Net Patient Revenue	\$354,010,685	\$357,636,636	\$380,107,064
B.	<u>Total Operating Expenses</u>			
1	Total Operating Expense	\$345,860,614	\$365,751,321	\$366,705,400
C.	<u>Utilization Statistics</u>			
1	Patient Days	59,299	58,224	54,860
2	Discharges	14,296	13,617	13,338
3	Average Length of Stay	4.1	4.3	4.1
4	Equivalent (Adjusted) Patient Days (EPD)	130,286	132,030	132,069
0	Equivalent (Adjusted) Discharges (ED)	31,410	30,878	32,110
D.	<u>Case Mix Statistics</u>			
1	Case Mix Index	1.26478	1.32541	1.39020
2	Case Mix Adjusted Patient Days (CMAPD)	75,000	77,170	76,266
3	Case Mix Adjusted Discharges (CMAD)	18,081	18,048	18,542
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	164,783	174,993	183,602
5	Case Mix Adjusted Equivalent Discharges (CMAED)	39,727	40,926	44,639
E.	<u>Gross Revenue Per Statistic</u>			
1	Total Gross Revenue per Patient Day	\$21,454	\$21,725	\$23,470
2	Total Gross Revenue per Discharge	\$88,992	\$92,893	\$96,532
3	Total Gross Revenue per EPD	\$9,765	\$9,581	\$9,749
4	Total Gross Revenue per ED	\$40,504	\$40,965	\$40,098
5	Total Gross Revenue per CMAEPD	\$7,721	\$7,228	\$7,013
6	Total Gross Revenue per CMAED	\$32,025	\$30,907	\$28,844

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	ACTUAL FY 2016
7	Inpatient Gross Revenue per EPD	\$4,444	\$4,225	\$4,050
8	Inpatient Gross Revenue per ED	\$18,435	\$18,065	\$16,656
F.	<u>Net Revenue Per Statistic</u>			
1	Net Patient Revenue per Patient Day	\$5,970	\$6,142	\$6,929
2	Net Patient Revenue per Discharge	\$24,763	\$26,264	\$28,498
3	Net Patient Revenue per EPD	\$2,717	\$2,709	\$2,878
4	Net Patient Revenue per ED	\$11,271	\$11,582	\$11,838
5	Net Patient Revenue per CMAEPD	\$2,148	\$2,044	\$2,070
6	Net Patient Revenue per CMAED	\$8,911	\$8,739	\$8,515
G.	<u>Operating Expense Per Statistic</u>			
1	Total Operating Expense per Patient Day	\$5,832	\$6,282	\$6,684
2	Total Operating Expense per Discharge	\$24,193	\$26,860	\$27,493
3	Total Operating Expense per EPD	\$2,655	\$2,770	\$2,777
4	Total Operating Expense per ED	\$11,011	\$11,845	\$11,420
5	Total Operating Expense per CMAEPD	\$2,099	\$2,090	\$1,997
6	Total Operating Expense per CMAED	\$8,706	\$8,937	\$8,215
H.	<u>Nursing Salary and Fringe Benefits Expense</u>			
1	Nursing Salary Expense	\$45,660,781	\$48,109,273	\$47,399,411
2	Nursing Fringe Benefits Expense	\$10,194,297	\$12,181,092	\$9,690,325
3	Total Nursing Salary and Fringe Benefits Expense	\$55,855,078	\$60,290,365	\$57,089,736
I.	<u>Physician Salary and Fringe Expense</u>			
1	Physician Salary Expense	\$28,083,459	\$29,654,826	\$30,400,071
2	Physician Fringe Benefits Expense	\$6,269,956	\$7,508,493	\$6,214,984
3	Total Physician Salary and Fringe Benefits Expense	\$34,353,415	\$37,163,319	\$36,615,055
J.	<u>Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</u>			
1	Non-Nursing, Non-Physician Salary Expense	\$91,101,334	\$90,314,138	\$96,463,710

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	ACTUAL FY 2016
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$20,339,427	\$22,867,210	\$19,750,837
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$111,440,761	\$113,181,348	\$116,214,547
K.	Total Salary and Fringe Benefits Expense			
1	Total Salary Expense	\$164,845,574	\$168,078,237	\$174,263,192
2	Total Fringe Benefits Expense	\$36,803,680	\$42,556,795	\$35,656,146
3	Total Salary and Fringe Benefits Expense	\$201,649,254	\$210,635,032	\$209,919,338
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	520.4	540.2	500.8
2	Total Physician FTEs	134.5	137.3	139.3
3	Total Non-Nursing, Non-Physician FTEs	1426.3	1429.7	1464.2
4	Total Full Time Equivalent Employees (FTEs)	2,081.2	2,107.2	2,104.3
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$87,742	\$89,058	\$94,647
2	Nursing Fringe Benefits Expense per FTE	\$19,589	\$22,549	\$19,350
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$107,331	\$111,607	\$113,997
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$208,799	\$215,986	\$218,235
2	Physician Fringe Benefits Expense per FTE	\$46,617	\$54,687	\$44,616
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$255,416	\$270,672	\$262,850
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$63,872	\$63,170	\$65,882
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$14,260	\$15,994	\$13,489
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$78,133	\$79,164	\$79,371
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$79,207	\$79,764	\$82,813

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	ACTUAL FY 2016
2	Total Fringe Benefits Expense per FTE	\$17,684	\$20,196	\$16,944
3	Total Salary and Fringe Benefits Expense per FTE	\$96,891	\$99,960	\$99,757
Q.	Total Salary and Fringe Ben. Expense per Statistic			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$3,401	\$3,618	\$3,826
2	Total Salary and Fringe Benefits Expense per Discharge	\$14,105	\$15,469	\$15,738
3	Total Salary and Fringe Benefits Expense per EPD	\$1,548	\$1,595	\$1,589
4	Total Salary and Fringe Benefits Expense per ED	\$6,420	\$6,821	\$6,538
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$1,224	\$1,204	\$1,143
6	Total Salary and Fringe Benefits Expense per CMAED	\$5,076	\$5,147	\$4,703